

2002

Guide to Wisconsin Hospitals

*Bureau of Health Information
Division of Health Care Financing
Wisconsin Department of Health and Family Services*

FOREWORD

The *Guide to Wisconsin Hospitals, Fiscal Year 2002*, presents information on hospital finances, services, and utilization. The data for this report were taken from the *FY 2002 Hospital Fiscal Survey* and the *2002 Annual Survey of Hospitals*. These data were collected and this report issued under Chapter 153, Wisconsin Statutes.

This report was produced under the overall direction and supervision of John Chapin, Director, Bureau of Health Information. David Woldseth, Ann Spooner and Torrey Nelson, Research Analysts, generated the data and revised the text; David Woldseth wrote the report; Patricia Nametz edited it.

This publication is not an exhaustive compilation of all data collected through the surveys. Readers desiring additional utilization, staffing, or financial information on a specific hospital should contact the Bureau of Health Information regarding the availability and cost of specific data requests.

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INTRODUCTION

The *Guide to Wisconsin Hospitals, Fiscal Year 2002*, presents selected descriptive financial, utilization, and staffing data about individual Wisconsin hospitals. It also provides summary and trend information for selected aggregate data.

The report is based on data submitted to the Department of Health and Family Services on the FY 2002 Hospital Fiscal Survey and the 2002 Annual Survey of Hospitals by general medical-surgical (GMS) hospitals, psychiatric (psych) hospitals, alcohol and other drug abuse (AODA) hospitals, state-operated mental health (state) institutes, and rehabilitation (rehab) hospitals. Data from Veterans Affairs hospitals are collected on a voluntary basis but are not included in this report; nor are data from hospitals that submitted partial-year data.

Types of Hospitals

General medical-surgical (GMS) hospitals (128 in FY 2002) provide diagnostic and therapeutic services to patients for a variety of medical and surgical conditions.

Critical Access Hospitals (CAH) (20 in FY 2002) are GMS facilities that provide 24-hour emergency care, inpatient, outpatient, and swing-bed services. Many also provide obstetric services. Under the Wisconsin Rural Hospital Flexibility Program – a Medicare program – hospitals located in rural counties, or rural areas of urban counties, may be certified as CAHs if they meet eligibility conditions and area requirements. In 2002, 20 hospitals were operating as CAH-certified. Rural CAH applicants must be 35 miles from another hospital; if closer, they must be declared a “necessary provider of health care services” according to state plan area criteria. They are limited to 15 acute care beds and 10 swing beds. Additionally, they may have up to four permanent 24-hour observation beds. Length of stay for acute care patients is limited to an annual 96-hour average per patient. If further inpatient care is needed, patients are transferred to contractually established referral hospitals. CAHs

are considered a new provider type providing first-line emergency and community-integrated health care. Hospitals certified as CAHs are noted as such in Section VII (Individual Hospital Tables).

Specialty hospitals provide services to specific categories of patients. In Wisconsin, specialty hospitals include the following:

- Psychiatric hospitals (12 in FY 2002) provide diagnostic and therapeutic services to patients with mental or emotional disorders.
- Alcohol and Other Drug Abuse (AODA) hospitals (1 in FY 2002) provide diagnostic and therapeutic services to patients with alcohol, drug abuse or addiction problems.
- State-operated mental health institutes (2 in FY 2002) provide comprehensive and intensive diagnostic, therapeutic, and support services to patients with unusually complex or difficult mental, emotional, or developmental disorders.
- Rehabilitation hospitals (1 in FY 2002) provide a comprehensive array of restoration services for the physically disabled and all support services necessary to help them attain their maximum level of functioning.

Veterans Affairs hospitals (3 in FY 2002) provide diagnostic and therapeutic services to armed forces veterans only. Because they are exempt from state data collection mandates, these facilities are not included in this report.

Control of Hospitals

Different types of organizations own and control the policies and operations of Wisconsin hospitals. Of the 142 non-federal hospitals that provided full-year data to the 2002 Annual Survey of Hospitals, 124 are nongovernmental, not-for-profit entities, owned either by a religious organization (36) or by some other not-for-profit corporation (88). Two hospitals are state-operated and nine are county-operated. Four hospitals (three GMS and one rehabilitation) are investor-owned, for-profit facilities.

Location of Hospitals

Sixty-three of the state's 72 counties have at least one GMS hospital. Thirty-two counties have two or more GMS hospitals. Milwaukee County has the most, with 15. Brown County, Dane County, Racine County, St. Croix County and Waukesha County have four GMS hospitals each.

Psychiatric hospitals are located in six counties; rehabilitation or state hospitals are found in three counties; and the sole AODA hospital is in Brown County.

Data Sources

The data in this report are drawn from two surveys conducted annually by the Department of Health and Family Services, Bureau of Health Information (BHI): the Hospital Fiscal Survey and the Annual Survey of Hospitals.

Completion of the Hospital Fiscal Survey, which collects financial data from hospitals, has been mandatory since its inception in 1989. Completion of the Annual Survey of Hospitals, which collects utilization and staffing information, was made mandatory beginning April 1, 1992.

The financial, utilization and staffing figures in this report are based on each hospital's fiscal year (FY). Fiscal years vary from hospital to hospital, according to individual accounting practices. The most common fiscal year is a calendar fiscal year, beginning January 1 and ending December 31 (see Table 1). Sixty-five of the 142 reporting hospitals (46%) had a calendar fiscal year in 2002.

All data used in this report are based on each hospital's 2002 fiscal year. Only hospitals that reported a full fiscal year's data are included. Excluded are data from St. Catherine's Hospital, Inc., Kenosha, and Rock County Psychiatric Hospital, Janesville. Both were closed in 2002. Two hospitals opened during the 2002 fiscal year but have not yet reported a full fiscal year of data;

therefore, they are not included in the data. They are: Columbia Center, LLC, Milwaukee, and Select Specialty Hospital, St. Luke's, Milwaukee. Eagle River Memorial Hospital, United Memorial Hospital- Kenosha Medical Center Campus, and Howard Young Medical Center, Woodruff all changed fiscal years this past year, and they are not included in the data set.

The hospital financial information in this report is fiscal year data based on actual revenue received from payers. In contrast, the hospital information in the annual Health Care Data Report is calendar year information on billed charges (not actual reimbursement) from expected payers.

Table 1. Fiscal Year Ending Date, Wisconsin Hospitals, FY 2002

Fiscal Year End	Number of Hospitals
02/28/02	2
03/31/02	5
04/30/02	1
06/30/02	36
07/31/02	2
08/31/02	1
09/30/02	30
12/31/02	65

Source: 2002 *Annual Survey of Hospitals*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Volume Groups and Analysis Areas

Volume groups and analysis areas are discussed in Section III (Comparative Data), and are defined in Appendix 1 (Glossary of Terms). The hospital index (Appendix 5) at the end of this publication shows the volume group and analysis area to which each hospital belongs.



SUMMARY DATA: FISCAL YEAR 2002

- One hundred forty-two hospitals submitted full-year data to the Department of Health and Family Services, Bureau of Health Information. Of this total, 128 were general medical-surgical (GMS) hospitals, 12 were psychiatric (psych) hospitals, one was a rehabilitation (rehab) hospital, and one was an alcohol and other drug abuse (AODA) hospital. Two were state-owned (state) hospitals.
- Of the 142 hospitals that submitted full-year data, 134 were not-for-profit. Eight hospitals (all GMS) were for-profit facilities owned by partnerships or corporations.
- Of the 134 not-for-profit hospitals, two were state-operated hospitals, eight were county-operated hospitals, 36 were religious hospitals, and 88 were other not-for-profit hospitals.
- In 2002, there were 20 Critical Access Hospitals (CAHs), up from 18 in 2001.
- The overall average occupancy rate for Wisconsin hospitals was 58% in FY 2002. GMS hospitals had an average occupancy rate of 56%, psychiatric hospitals 62%, the AODA hospital 23%, state hospitals 94%, and the rehabilitation hospital 51%.
- On average, there were 7,929 patients hospitalized on any given day: 7,003 at GMS hospitals, 361 at psychiatric hospitals, 5 at the AODA hospital, 540 at state hospitals, and 20 at rehabilitation hospitals.
- There were 609,252 hospital discharges in FY 2002: 589,793 from GMS hospitals, 16,225 from psychiatric hospitals, 123 from the AODA hospital, 2,504 from state hospitals, and 607 from the rehabilitation hospital.
- There were 2,894,031 inpatient days reported by Wisconsin hospitals, of which 2,556,033 were for GMS hospitals, 131,614 were for psychiatric hospitals, 1,992 were for the AODA hospital, 196,930 were for the state hospitals, and 7,462 were for the rehabilitation hospital.
- Outpatient visits totaled 11,702,151 at the 142 Wisconsin hospitals that provided outpatient services. GMS hospitals had 11,017,459 outpatient visits, psychiatric hospitals had 305,425, the AODA hospital had 8,240, the state hospitals had 22,092, and the rehabilitation hospital had 16,306.
- Medicare accounted for 40.9% of total gross patient revenue, Medicaid for 9.2%, and other public sources for 2.2%. Commercial insurance accounted for 42.8% of total gross patient revenue, and self-pay/other accounted for 4.3%.
- Total hospital revenue was \$9,370.8 million, \$9,021 million at GMS hospitals and \$349.8 million at specialty hospitals.
- Wisconsin hospitals collected 59% of total gross patient revenue (patient charges). GMS hospitals collected 58% of patient charges, psychiatric hospitals collected 69%, the AODA hospital collected 83%, the state hospitals collected 97%, and the rehabilitation hospital collected 58%.
- The average net revenue received per inpatient day in a Wisconsin hospital in FY 2002 was \$1,683; the average length of stay was 4.8 days. Net revenue received per inpatient day (and average length of stay) was \$1,831 for GMS hospitals (4.4 days), \$638 for psychiatric hospitals (8.6 days), \$539 for the AODA hospital (16.2 days), \$486 for the state hospitals (73.9 days), and \$1,090 for the rehabilitation hospital (12.3 days).

- The average net revenue received per outpatient visit in a Wisconsin hospital in FY 2002 was \$340. GMS hospitals received \$343, psychiatric hospitals received \$291, the AODA hospital received \$93, the state hospitals received \$61, and the rehabilitation hospital received \$214.
- Salaries and fringe benefits represented 48.2% of total expenses for Wisconsin hospitals. For GMS hospitals, salaries and fringe benefits represented 47.8% of total expenses, for psychiatric hospitals 48.9%, for the AODA hospital 64.2%, for state hospitals 81.0%, and for the rehabilitation hospital 47.3%.
- The profit margin across all Wisconsin hospitals was 6.2% in FY 2002. State hospitals had the highest profit margin (7.8%) followed by GMS hospitals (6.4%), and the AODA hospital (4.1%). The other two hospital types (psychiatric and rehabilitation hospitals) showed losses of -0.4% and -26.6%, respectively.
- Wisconsin hospitals reported net income of \$579.8 million in FY 2002. GMS hospitals reported net income of \$575.7 million, and specialty hospitals together reported net income of \$4.1 million.
- Twenty-four hospitals lost money in FY 2002, up from 18 in FY 2001.
- There were 13,854 beds set up and staffed in FY 2002 at the 142 reporting hospitals. Of these, 12,626 were at GMS hospitals, 623 were at psychiatric hospitals, 24 were at the AODA hospital, 541 were at state hospitals, and 40 were at the rehabilitation hospital.
- GMS hospitals averaged the highest ratio of full-time equivalent (FTE) staff per patient (6.0). The AODA hospital was next (3.5), followed by the rehabilitation hospital (3.3), psychiatric hospitals (2.6), and state hospitals (2.5). Statewide, for all hospitals, the average was 5.7 FTEs per patient.
- GMS hospitals employed 158 full-time licensed nurses per 100 patients. Psychiatric hospitals employed 48 per 100 patients, the AODA hospital 66, the state hospitals 41, and the rehabilitation hospital 78.
- Forty-two of the 142 reporting hospitals (29.6%) indicated they had integrated quality evaluation projects involving the National Council on Quality Assurance (NCQA), and 111 (78.2%) indicated they had integrated quality evaluation projects involving the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

SECTION I. Financial Information

The following financial terms appear in this report:

Deductions: The portion of charges incurred by patients but not reimbursed by third-party payers, government, and private payers. Deductions include charity care; they exclude bad debt.

Expenses: Costs of operation charged to a hospital during the fiscal year. They include bad debt.

Gross Patient Revenue: The total charges generated by a hospital from inpatient and outpatient services. Gross patient revenue consists of charges to Medicare, Medical Assistance, other public programs, commercial insurance, and other self/nonpublic payers. ["Other public programs" includes county unified services boards, general relief, and the federal CHAMPUS program for military personnel and dependents. "Commercial insurance" includes group and individual accident and health insurance, self-funded plans, Health Maintenance Organizations (HMOs), other alternative health care plans, and workers' compensation.]

Net Income: Revenue and gains in excess of expenses and losses.

Net Patient Revenue: Gross patient revenue minus all deductions; the actual payments received from patient charges.

Nonoperating Gains: Gifts, donations, endowments, investments, and any other gains not related to patient care or hospital-related patient services.

Nonoperating Losses: State and federal corporate income and real estate taxes and other losses not directly related to patient care or hospital-related patient services.

Other Revenue: Revenue from services provided to patients, other than health care, as well as sales and services to nonpatients (e.g., parking, gift shops, cafeterias).

Total Revenue: The sum of net patient revenue and other revenue.

NOTE: For ease of presentation, dollar amounts are generally reported in millions or billions. For example, \$5,396,832,249 is the same as \$5,396.8 million or \$5.4 billion.

Table 2. Summary Financial Data (in millions), Wisconsin Hospitals, FY 2002

	All Hospitals	GMS	Specialty
Gross Patient Revenue	\$15,073.6	\$14,689.9	\$383.7
Net Patient Revenue	8,853.6	8,562.8	290.8
Total Revenue	9,370.8	9,021.0	349.8
Expenses	8,822.4	8,475.6	346.7
Nonoperating Gains/Losses	31.3	30.3	1.0
Net Income	579.8	575.7	4.1

Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

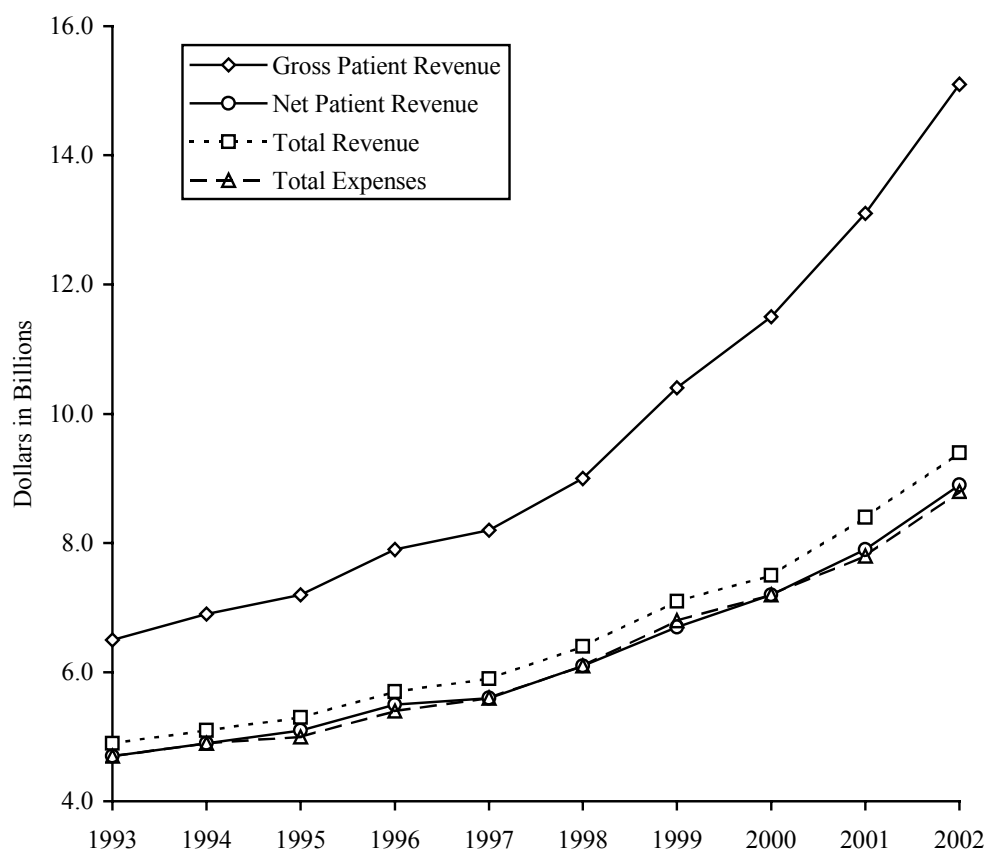
In 2002, Wisconsin hospitals generated \$15.1 billion in total revenue (see Table 2, previous page). After expenses and nonoperating gains and losses, hospitals were left with total net income of \$579.8 million.

Between fiscal years 1993 and 2002, total gross patient revenue at Wisconsin hospitals more than doubled, from \$6.8 billion to \$15.1 billion (see Figure 1). Net patient revenue increased 78 percent, from \$5.0 billion to \$8.9 billion, and expenses increased 69 percent, from \$5.2 billion to \$8.8 billion. Net income increased 140 percent, from \$241.7 million to \$579.8 million.

During the same period, total gross patient revenue at GMS hospitals increased 178 percent, from \$5.3 billion to \$14.7 billion. Net patient revenue rose 121 percent, from \$3.9 billion to \$8.6 billion. Expenses increased 118 percent, from \$3.9 billion to \$8.5 billion. Net income increased 165 percent, from \$217.4 million to \$575.7 million.

Specialty hospitals went from a net income of \$24.3 million in 1993 to \$4.1 million in 2002. The number of specialty hospitals decreased from 22 in 1993 to 14 in 2002.

Figure 1. Fiscal Trends for Wisconsin Hospitals, FY 1993-2002



Source: FY 1993-2002 Hospital Fiscal Surveys, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Outpatient Revenue Continues to Increase as a Proportion of All Revenue

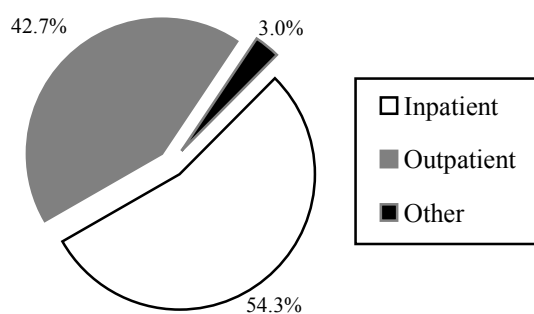
Hospital revenue comes from several sources:

- Charges billed to inpatients;
- Charges billed to outpatients; and
- Other revenue, such as tax appropriations, cafeteria and gift shop sales, and parking fees.

The movement of patient care from an inpatient to an outpatient setting continued in FY 2002. From 1993 to 2002, inpatient revenue as a proportion of total gross patient and other revenue at all Wisconsin hospitals decreased from 66.8 percent to 54.3 percent. This corresponds to an increase in outpatient gross revenue as a proportion of total gross patient and other revenue, from 30.3 percent to 42.4 percent.

Since 1993, inpatient revenue at GMS hospitals has decreased from 66.8 to 54.3 percent (see Figure 2). Outpatient revenue has grown from 30.3 to 42.7 percent.

Figure 2. Sources of Revenue, GMS Hospitals, Wisconsin, FY 2002



Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Generally, small, rural GMS hospitals rely to a greater degree on outpatient services as a source of income than do larger, urban hospitals. Larger hospitals serve larger population bases and are more often affiliated with health care systems or networks that have separate outpatient care facilities.

The GMS hospitals with the highest percentages of gross outpatient revenue as a proportion of total gross patient and other revenue were: Orthopaedic Hospital of Wisconsin-Glendale, at 93.6 percent; Oak Leaf Surgical of Eau Claire, with 89.2 percent; and North Central Health Care Facilities of Wausau, at 76.9 percent.

Three GMS hospitals did not generate any gross outpatient revenue. Those three were: Select Specialty Hospital; West Allis, Lifecare Hospitals of Milwaukee-North; and Lifecare Hospitals of Milwaukee-Central.

In 2002, Wisconsin hospitals reported \$517.2 million in other (nonpatient) revenue. Psychiatric hospitals relied most on other revenue, with 17.0 percent of hospital revenue from this source, compared with 3.0 percent at GMS hospitals, 1.3 percent at the rehabilitation hospital, 4.6 percent at the state-operated mental health institutes, and 0.02 percent at the AODA hospital (see Table 3, next page).

Table 3. Revenue Sources as a Percent of Total Gross Patient and Other Revenue, Wisconsin Hospitals, FY 2002

Type	Hospitals	Inpatient Revenue	Outpatient Revenue	Other Revenue
GMS	128	54.3%	42.7%	3.0%
Psych	10	43.0	40.0	17.0
AODA	1	62.8	37.2	0.02
State	2	93.9	1.6	4.6
Rehab	1	72.2	26.5	1.3
TOTAL	142	54.3%	42.4%	3.3%

Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Public Payment Sources as a Percentage of Gross Patient Revenue

In 2002, commercial insurance and Medicare were the major sources of payment for all Wisconsin hospitals combined, with commercial insurance constituting 42.8 percent of revenue and Medicare 40.9 percent (see Table 4). Government payer sources combined (Medicare, Medical Assistance and other public programs), however, accounted for a higher proportion of revenue (52.3 percent) than did private sources, including commercial insurance (47.7 percent). Medicare gross patient revenue as a proportion of total gross patient revenue for each type of hospital ranged from a

high of 41.6 percent at GMS hospitals to a low of 0.0 percent at the sole AODA hospital.

Medical Assistance (Medicaid) gross patient revenue as a proportion of total gross patient revenue was highest at the AODA hospital, at 50.2 percent. Psychiatric and state hospitals and the rehabilitation hospital reported 15.1, 18.3 and 13.1 percent of total gross patient revenue respectively from Medical Assistance. GMS hospitals reported the smallest percent of Medical Assistance revenue, at 9.1 percent.

Revenue from commercial insurance as a proportion of total gross patient revenue was highest for the AODA hospital (47.5%), and lowest at state hospitals (14.0%).

Table 4. Payment Sources as a Percent of Total Gross Patient Revenue, Wisconsin Hospitals, FY 2002

Type	Hospitals	Public Source			Private Source	
		Medicare	Medical Assistance	Other Public	Commercial	Self/Other
GMS	128	41.6%	9.1%	1.3%	43.1%	4.8%
Psych	10	14.0	15.1	32.9	31.9	6.1
AODA	1	0.0	50.2	0.0	47.5	2.3
State	2	11.1	18.3	56.4	14.0	0.3
Rehab	1	40.5	13.1	0.5	45.7	0.3
TOTAL	142	40.9%	9.2%	2.2%	42.8%	4.8%

Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Percent of Charges Received by Hospitals

Overall, Wisconsin hospitals received 59 cents for each dollar they charged in 2002 (see Table 5), slightly less than the proportion they received in 2001 (61 cents). GMS hospitals received 58.3 percent of their charges. The psychiatric hospitals, the AODA hospital, the state-operated mental health institutes, and the rehabilitation hospital received 69, 83, 97, and 58 percent of their charges, respectively.

The GMS hospital with the highest percentage of gross patient revenue received was Bloomer Medical Center, Bloomer, at 91 percent. St. Francis Hospital, Milwaukee, received the lowest percentage of gross patient revenue, at 42 percent.

Two types of deductions from gross patient revenue are used to arrive at net patient revenue: contractual adjustments and noncontractual adjustments. Contractual adjustments refer to discounts on hospital charges that are contracted between hospitals and

payers. Noncontractual deductions include such items as courtesy discounts, employee discounts, administrative adjustments, research grants, and charity care. Charity care involves full or partial waiver by a hospital of patient charges due to the patient's inability to pay.

Deductions from revenue for all Wisconsin hospitals in 2002 totaled \$6.2 billion (see Table 6, next page). Deductions from revenue increased dramatically for GMS hospitals between 1993 and 2002, from 27 percent of gross billings (or \$1.8 billion) in 1993 to 42 percent of gross billings (or \$6.1 billion) in 2002.

For all Wisconsin hospitals, contractual adjustments constituted 96 percent of unpaid charges in 2002, similar to 2001 (95 percent) (see Tables 6 and 7, next page). The largest adjustment (\$3.5 billion or 56 percent of total deductions) came from Medicare, followed by \$1.4 billion (23 percent) from commercial sources and \$893.2 million (14 percent) from Medical Assistance.

Table 5. Percent of Total Gross Patient Revenue Actually Collected, Wisconsin Hospitals, FY 2002

Type	Hospitals	Gross Patient Revenue (in millions)	Deductions from Revenue (in millions)	Net Patient Revenue (in millions)	% of Gross Collected
GMS	128	\$14,689.9	\$6,127.1	\$8,562.8	58%
Psych	10	263.2	82.2	180.9	69
AODA	1	2.2	0.4	1.8	83
State	2	100.1	2.7	97.4	97
Rehab	1	18.4	7.6	10.7	58
TOTAL	142	\$15,073.6	\$6,220.1	\$8,853.6	59%

Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 6. Summary of Hospital Revenue (in millions), Wisconsin, FY 2002

	All Hospitals	GMS	Specialty
Gross Patient Revenue (Patient charges)	\$15,073.6	\$14,689.9	\$383.7
Contractual Adjustments:			
Medicare	3,502.6	3,479.8	22.8
Medical Assistance	893.2	877.2	16.0
Other Public Sources	112.4	111.7	0.7
Commercial Sources	1,414.3	1,381.6	32.7
Other Contractual Adjustments	47.5	45.2	2.3
Charity Care	194.2	177.2	17.0
Other Noncontractual Deductions	55.9	54.4	1.4
Total Deductions	\$6,220.1	\$6,127.1	\$92.9
Net Patient Revenue	8,853.6	8,562.8	290.8
Other Revenue	517.2	458.2	59.0
Total Revenue	\$9,370.8	\$9,021.0	\$349.8

Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

At GMS hospitals, from 1993 to 2002, Medicare adjustments, as a proportion of all unpaid charges, decreased from 60.0 percent to 56.8 percent; Medical Assistance adjustments decreased from 15.7 to 14.3 percent; and adjustments from other public sources decreased from 2.0 to 1.8 percent. From 1993 to 2002, charity care at GMS hospitals

dropped from 4.6 to 2.9 percent of all unpaid charges.

At GMS hospitals, from 1993 to 2002, adjustments from commercial sources, as a proportion of all unpaid charges, increased from 16.5 percent in 1993 to 22.6 percent in 2002.

Table 7. Deductions from Revenue as a Percent of Total Deductions from Revenue, Wisconsin Hospitals, FY 2002

	All Hospitals	GMS	Specialty
Contractual Adjustments:			
Medicare	56.3%	56.8%	24.5%
Medical Assistance	14.4	14.3	17.2
Other Public Sources	1.8	1.8	0.8
Commercial Sources	22.7	22.6	35.2
Other Contractual Adjustments	0.8	0.7	2.5
Charity Care	3.1	2.9	18.3
Other Noncontractual Deductions	0.9	0.9	1.5

Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Average Net Revenue per Inpatient Day

In 2002, the average net revenue received per inpatient day in a Wisconsin hospital was \$1,683 with an average length of stay of 4.8 days (see Table 8). Among all hospital types, GMS hospitals reported the highest average net revenue per inpatient day at \$1,831 but kept patients for fewer days (an average 4.4 days) than psychiatric (8.6 days), AODA (16.2 days), state (73.9 days) or rehabilitation hospitals (12.3 days). GMS hospitals had the highest average outpatient net revenue per visit, at \$343.

In 2002, the average inpatient net revenue (gross revenue minus deductions) received per inpatient stay for all hospitals was \$8,238. GMS hospitals received an average of \$8,188. Average inpatient net revenue for the specialty hospitals ranged from \$5,171 per hospitalization for the psychiatric hospitals to \$38,435 per hospitalization for state-operated mental health institutes. Patients at the state-operated mental health institutes had an average length of stay of 73.9 days, far longer than that of patients at the four other types of hospitals.

The two GMS hospitals with the highest net revenue per patient were: Lakeview Neurorehab

Center Midwest, Waterford (\$56,625), and Kindred Hospital-Milwaukee, Greenfield (\$47,093). Three others had net per-patient revenue over \$20,000: Select Specialty Hospital, West Allis (\$32,247), Lifecare Hospitals of Milwaukee-North (\$30,692), and Lifecare Hospitals of Milwaukee-Central (\$26,993).

Nine GMS hospitals had a net revenue per patient between \$10,000 and \$19,999. They were: Osseo Area Hospital and Nursing Home, Inc., Osseo (\$17,242); Children's Hospital of Wisconsin, Milwaukee (\$14,958); University of Wisconsin Hospital and Clinics Authority, Madison (\$14,796); Froedtert Memorial Lutheran Hospital, Milwaukee (\$13,847); St. Luke's Medical Center, Milwaukee (\$12,512); Memorial Community Hospital, Edgerton (\$11,438); Chippewa Valley Hospital, Durand (\$10,781); Saint Joseph's Hospital, Marshfield (\$10,735); and Bloomer Medical Center, Bloomer (\$10,181).

Children's Hospital, UW Hospital & Clinics, Froedtert Memorial Lutheran and St. Luke's Medical Center had some of the highest net revenue per patient because they are major teaching facilities. Teaching facilities have additional operating expenses because they attract patients who require more intensive and complex care.

Table 8. Net Revenue per Inpatient Stay, per Inpatient Day, Length of Stay, and per Outpatient Visit, Wisconsin Hospitals, FY 2002

Type	Per Inpatient Stay	Per Inpatient Day	Length of Stay (days)	Per Outpatient Visit
GMS	\$8,188	\$1,831	4.4	\$343
Psych	5,171	638	8.6	291
AODA	8,721	539	16.2	93
State	38,435	486	73.9	61
Rehab	13,395	1,090	12.3	214
TOTAL	\$8,238	\$1,683	4.8	\$340

Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Salaries and Fringe Benefits as a Proportion of Hospital Expenses

Hospital expenses fall into four major categories:

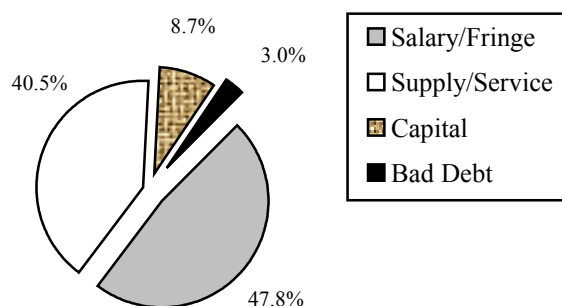
- Salaries and fringe benefits (personnel costs);
- Supplies and services;
- Capital (cost of refinancing, renovation, expansion, or equipment purchases); and
- Bad debt.

As a proportion of total expenses, overall salary and fringe benefits for Wisconsin hospitals have decreased modestly over time, from 52.4 percent in 1993 to 48.2 percent in 2002. The supplies and services proportion has increased slightly, from 36.8 percent in 1993 to 40.4 percent in 2002.

The rehabilitation hospital had the largest supplies and services component of hospital expenses (47.0 percent). Psychiatric hospitals had the second largest supplies and services component (46.4 percent), and GMS had the third largest (40.5 percent).

Overall, bad debt as a proportion of hospital expenses has remained relatively steady, at 2.1 percent of total expenses in 1993 and 2.9 percent of total expenses in 2002. The AODA hospital experienced a small decrease in bad debt from 1993 to 2002, from 5.2 percent of expenses in 1993 to 4.8 percent of expenses in 2002. State-operated mental health institutes reported no bad debt because of the nature of their funding.

Figure 3. Expense Categories, Wisconsin GMS Hospitals, FY 2002



Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 9. Percent of Expenses Allocated to Each Component, Wisconsin Hospitals, FY 2002

Type	Hospitals	Salary/ Fringe Benefits	Supplies/ Services	Capital	Bad Debt
GMS	128	47.8%	40.5%	8.7%	3.0%
Psych	10	48.9	46.4	3.2	1.6
AODA	1	64.2	18.0	13.1	4.8
State	2	81.0	15.1	3.9	0.0
Rehab	1	47.3	47.0	4.7	1.1
TOTAL	142	48.2%	40.4%	8.5%	2.9 %

Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 10. Revenue, Expense, Gain/Loss, Net Income (in millions), and Profit Margin, Wisconsin Hospitals, FY 2002

Type	Hospitals	Total Revenue	Total Expenses	Nonoperating Gains/Losses	Net Income	Profit Margin
GMS	128	\$9,021.0	\$8,475.6	\$30.29	\$575.7	6.4%
Psych	10	234.9	235.8	-0.79	-1.0	-0.4
AODA	1	1.8	1.7	0.00	0.1	4.1
State	2	102.2	95.3	1.06	7.9	7.8
Rehab	1	11.0	14.0	0.51	-2.9	-26.6
TOTAL	142	\$9,370.8	\$8,822.4	\$31.32	\$579.8	6.2%

Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Profit Margin for Wisconsin Hospitals

Even though most Wisconsin hospitals are not-for-profit facilities, hospital revenue and gains can and do exceed expenses and losses at many facilities. The term “net income” is used to identify the excess (or deficit) of revenue and gains minus expenses and losses. When expressed as a percent, it is referred to as the “profit margin” (net income as a percent of total revenue and nonoperating gains/losses). Table 10 presents hospital revenue, expense, gain/loss, net income, and profit margin by hospital type.

The GMS hospitals with the highest net incomes were St. Luke’s Medical Center, Milwaukee, at \$57.3 million; Children’s Hospital of Wisconsin, Milwaukee, at \$38.2 million; Gundersen Lutheran Medical Center, La Crosse, at \$31.8 million; University of Wisconsin Hospital and Clinics, Madison, \$29.3 million; and Froedtert Memorial Lutheran Hospital, Milwaukee, at \$29.1 million. The GMS hospital with the highest profit margin was Orthopaedic Hospital of Wisconsin-Glendale at 40.0 percent. Rounding out the top five were: Sacred Heart Hospital of Tomahawk (23.6%), Osceola Medical Center (20.3%), Elmbrook Memorial Hospital of Brookfield (20.2%), and St. Mary’s-Ozaukee in Mequon (19.6%).

Twenty-four Wisconsin hospitals reported a combined loss of \$65.6 million in 2002 (see Table 11). In 2001, 18 hospitals operated at a loss, with a combined loss of \$31.9 million. Specialty hospitals, as a group, lost \$5.9 million in 2002: three of the ten psychiatric hospitals lost \$3.0 million, and the state’s only rehabilitation hospital lost \$2.9 million.

More GMS hospitals lost money in 2002 (20) than 2001 (15). GMS losses increased from \$29.1 million in 2001 to \$59.7 million in 2002.

Table 11. Hospitals that Lost Money (in millions), Wisconsin, FY 2002

Hospitals	Type	Amount Lost
20	GMS	\$59.7
3	Psych	3.0
1	Rehab	2.9
24	TOTAL	\$65.6

Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Other Revenue and Nonoperating Gains

Other revenue and nonoperating gains, which include cafeteria and gift shop sales, charitable bequests, investment income, and extraordinary gains and losses, become critically important income sources for facilities striving to remain financially healthy. For Wisconsin hospitals losing money on patient care, other revenue and nonoperating gains can mean the difference between profit and loss, or can ease the degree of loss.

In 2002, Wisconsin hospitals reported \$517.2 million in other (nonpatient) revenue (\$458.2 million for GMS hospitals). Wisconsin hospitals reported \$31.3 million in nonoperating gains (\$30.3 million for GMS hospitals).

Balance Sheet Information: Assets, Liabilities, and Fund Balances

Assets include cash and cash equivalents, accounts receivable, plant, equipment, and other unrestricted assets. Liabilities include current liabilities, long-term debt, other liabilities, and unrestricted fund balances.

Table 12 shows a composite balance sheet by hospital type. State-operated mental health institutes are not required to submit balance sheet information and, therefore, are not included. Total assets do not equal total liabilities and fund balances for GMS hospitals because some combination facilities are unable to separate hospital and nursing home data.



Table 12. Assets, Liabilities, and Fund Balances (in millions), Wisconsin Hospitals, FY 2002

	GMS	Psych	AODA	Rehab
Hospitals	128	10	1	1
Assets:				
Cash and cash equivalents	\$921.1	\$2.3	\$0.39	\$2.68
Net patient accounts receivable	1,356.9	19.5	0.41	2.58
Other accounts receivable	105.9	9.3	0.00	0.17
Land, buildings, and equipment: net	4,488.9	26.1	0.02	1.46
Other assets	3,357.8	15.4	0.00	-1.86
Total unrestricted assets	10,230.8	72.8	0.82	4.88
Liabilities:				
Current liabilities	\$1,151.7	\$15.7	0.00	2.14
Long-term debt	2,731.5	19.4	0.00	0.00
Other liabilities	612.5	5.1	0.00	0.42
Unrestricted fund balances	5,742.3	32.4	0.81	2.31
Total liabilities and unrestricted funds	10,238.1	72.8	0.82	4.88

Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

SECTION II. Utilization and Staffing

Services Provided by GMS Hospitals

Most GMS hospitals provide basic medical-surgical services. For instance, 95 percent of GMS hospitals provided adult medical-surgical, acute services in 2002; 93 percent operated an emergency department; 88 percent provided orthopedic services; and 91 percent provided pediatric services.

Some GMS hospitals also offer more specialized kinds of medical and surgical care that are not widely available. For example, six hospitals in 2002 had tissue transplant, kidney transplant and bone marrow transplant services. Four perform heart/lung transplants. Five hospitals performed *in vitro* fertilization services. Ten hospitals offered positron emission tomography (PET). The hospitals providing specialized surgeries or relatively rare treatments such as these were generally located in larger urban areas or served as regional referral centers.

GMS hospitals that provide long-term acute care exclusively may appear different when compared to other GMS hospitals (see Section IV: Individual Hospital Tables).

GMS hospitals also provide most of the inpatient psychiatric and AODA care offered in the state. Twenty-eight percent of GMS hospitals (36 hospitals) provided inpatient alcoholism and chemical dependency services in separate and distinct units, and 31 percent (40 hospitals) offered inpatient psychiatric care services in such units.

Eight of the ten psychiatric hospitals provided inpatient alcohol and chemical dependency services in 2002.

In addition to the rehabilitation hospital in Wisconsin, 88 GMS hospitals had inpatient rehabilitation units, and 108 GMS hospitals offered outpatient rehabilitative services.

Hospital Occupancy Rates

The most common measure of a hospital's capacity utilization is its occupancy rate, defined as the average proportion of occupied beds at the hospital. Bed counts are based on the number of beds set up and staffed on the last day of the hospital's fiscal year. The occupancy rate for all Wisconsin hospitals in 2002 was 58 percent (see Table 13, next page), similar to the 57 percent occupancy rate in 2001.

Occupancy rates among GMS hospitals varied widely. While the overall occupancy rate for GMS hospitals in 2002 was 57 percent, 15 hospitals had occupancy rates over 70 percent. They were: Vernon Memorial Hospital, Viroqua (161%); Lakeview Neurorehab Center Midwest, Waterford (107%); Amery Regional Medical Center, Amery (102%); Saint Mary's Hospital Inc, Rhinelander (94%); Saint Joseph's Hospital, Marshfield (92%); St. Michael Hospital, Milwaukee (89%); Select Specialty Hospital, West Allis (87%); Children's Hospital of Wisconsin, Milwaukee (84%); St. Mary's Hospital Medical Center, Madison (81%); Sacred Heart Hospital, Tomahawk (79%); Wausau Hospital, Wausau (77%); Agnesian Healthcare, Fond du Lac (75%); All Saints- St. Mary's Medical Center, Racine (74%); Froedtert Memorial Lutheran Hospital, Milwaukee (73%); and St. Luke's Medical Center, Waukesha (72%).

At the other extreme, six GMS hospitals had occupancy rates of less than 10 percent. They are: Oak Leaf Surgical Hospital, Eau Claire (9.8%), Oconto Memorial Hospital, Oconto (9%), Wild Rose Community Memorial Hospital, Wild Rose (8%), Orthopaedic Hospital of Wisconsin-Glendale (8%), Franciscan Skemp Healthcare-Arcadia (6%), and Osseo Area Hospital, Osseo (3%).

One reason for the differences in occupancy rates is that hospitals routinely change the number of beds set up and staffed to reflect the census at the hospital. Some hospitals match beds set up and staffed to census, while others match bed counts to their approved bed capacity as it appears on their operating license.

The differences in bed counting methods make comparisons of occupancy rates problematic, and account for hospitals reporting occupancy rates of greater than 100 percent.

Sixty percent of all GMS hospitals (77 hospitals) had occupancy rates of less than 50 percent during 2002. Twenty-four hospitals (19 percent) had occupancy rates of less than 25 percent.

Table 13. Hospital Utilization, Wisconsin, FY 2002

Type	Hospitals	Beds Set Up and Staffed	Discharges	Inpatient Days	Occupancy Rate (%)	Average Census (patients)	Length of Stay (days)
GMS	128	12,626	589,793	2,581,353	56%	7,072	4.4
Psych	10	623	16,225	139,865	62	383	8.6
AODA	1	24	123	1,992	23	5	16.2
State	2	541	2,504	185,097	94	507	73.9
Rehab	1	40	607	7,462	51	20	12.3
TOTAL	142	13,854	609,252	2,915,769	58%	7,988	4.8

Excludes data on newborns.

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Hospitals Provide Many Outpatient Services

In addition to the basic medical-surgical and specialized services provided to inpatients, hospitals offer a great variety of outpatient services, including:

- Outpatient or day surgery
- Fertility testing/counseling
- Alcoholism/chemical dependency and psychiatric outpatient services
- Physical/rehabilitation therapy
- Renal dialysis
- Genetic counseling/screening
- Geriatric clinics
- Radiation therapy
- Sports medicine
- Emergency care

Overall, hospitals continue to expand the types of outpatient services they provide. See Table 19 (page 24) for more detail.

Table 14. Outpatient Visits, Wisconsin Hospitals, FY 2002

Type	Outpatient Visits	Hospitals with Outpatient Visits
GMS	11,323,431	125
Psych	333,021	8
AODA	7,674	1
State	25,855	1
Rehab	12,170	1
TOTAL	11,702,151	136

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

All GMS hospitals, except three (Select Specialty Hospital, West Allis, and two Lifecare Hospitals in Milwaukee), provided outpatient care on a nonemergency basis. Nine GMS hospitals did not provide emergency outpatient care in 2002. GMS hospitals reported that most of their outpatient visits were for nonemergency care. This held true for psychiatric hospitals and state-operated mental health institutes as well. No emergency outpatient visits were reported by five of the ten psychiatric

hospitals, by the sole AODA hospital, by either of the two state hospitals, or by the rehabilitation hospital.

One hundred twenty-one of the 124 reporting GMS hospitals offered outpatient surgical services in 2002. These 121 GMS hospitals performed 404,759 outpatient surgeries, or 69 percent of total GMS hospital surgeries. By comparison, these GMS hospitals performed 180,905 inpatient surgeries (30.9 percent of all GMS hospital surgeries) in 2002.

GMS Hospitals Have Highest Average Staff-to-Patient Ratio

Wisconsin hospitals employed 81,664 full-time equivalent (FTE) staff in 2002. This number includes both full- and part-time personnel. Ninety-six percent of all hospital personnel worked for GMS hospitals in 2002 (up one percentage point from 2001).

The overall average number of hospital staff FTEs per patient was 5.7 (see Table 15).

The staff-to-patient ratio for personnel classifications varies by hospital type (see Table 16, next page). For example, GMS hospitals had 158 licensed nurses per 100 patients, compared to 48 for psychiatric hospitals, 66 for the sole AODA hospital, 41 for state-operated mental-health institutes, and 78 for the rehabilitation hospital.

Among GMS hospitals, the ratio of registered nurses to licensed practical nurses and ancillary nursing personnel was 2.9. Consistent with findings from prior years, smaller hospitals

generally reported a lower ratio of registered nurses to licensed practical nurses and ancillary nursing personnel than did larger hospitals.

Table 15. FTEs and FTEs per Patient, Wisconsin Hospitals, FY 2002

	FTEs	FTEs per Patient
GMS	78,095	6.0
Psych	2,090	2.6
AODA	31	3.5
State	1,355	2.5
Rehab	93	3.3
TOTAL	81,664	5.7

Source: 2002 *Annual Survey of Hospitals*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Smaller GMS hospitals generally had a larger proportion of staff not involved in direct patient care, such as administrators and medical records personnel, since basic administrative and record-keeping functions must be performed regardless of patient volume.

Hospitals report that 92 percent of the 18,400 medical staff granted admitting privileges in Wisconsin hospitals were board certified (i.e., had passed an examination given by a medical specialty board and were certified by that board as specialists). See Section IV: Comparative Data, Tables 22-24, for more detail.



Table 16. FTEs per 100 Patients, by Occupational Categories, Wisconsin Hospitals, FY 2002

	GMS	Psych	AODA	State	Rehab
Administrators	15	4	46	4	14
Physicians	7	4	0	7	14
Residents	5	0	0	0	0
Licensed nurses	158	47	66	41	78
Other nursing personnel	54	32	29	86	41
Medical records	17	3	0	2	7
Pharmacy	15	2	0	2	0
Clinical lab	18	0	0	1	0
Radiology	21	0	0	0	0
Therapeutic services	19	10	0	13	78
Psychology/social work	5	18	0	15	8
Other	271	139	213	78	93
Total	605	261	354	247	333

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

SECTION III. Quality of Services/ Patient Safety

Quality Improvement Activities

Many hospitals participate in ongoing quality improvement, quality assurance and patient safety projects, programs and activities. A section of the 2002 Annual Survey of Hospitals asked specific questions about some of these activities.

Hospitals were asked if they work with the Institute for Safe Medication Practices (ISMP); participate in MetaStar's Sixth Scope of Work administered by the Centers for Medicare and Medicaid Services (CMS); participate in the Maryland Quality Indicators Project; or are active in another program, project or activity.

Hospitals were also asked if their organization has integrated quality evaluation projects involving the National Council on Quality Assurance (NCQA) and/or the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

Seventy-eight of the 142 reporting hospitals (55%) indicated that they were involved in work with ISMP. Eighty-eight hospitals (62%) indicated they were active in MetaStar's Sixth Scope of Work. Forty hospitals (28%) indicated they participated in the Maryland Quality Indicators Project. Fifty-one hospitals (36%) indicated they were active in other quality improvement programs, projects or activities.

Forty-two of the 142 reporting hospitals (30%) reported they had integrated quality evaluation projects involving NCQA, and 111 (78%) reported they had integrated quality evaluation projects involving JCAHO.

Patient Safety

The possibility of medication errors is a concern for all hospitals. The 2002 Annual Survey of Hospitals asked hospitals to provide information on pharmacy services.

One hundred thirteen of the 142 reporting hospitals (80%) reported they provide 24-hour pharmacy services. The most common method of providing 24-hour pharmacy services was telephone access to on-call staff (72). Nine hospitals have a contractual arrangement with a community pharmacy. Twenty-eight hospitals reported they had a pharmacist on duty 24 hours a day.

Hospitals were asked whether, prior to dispensing medication, the pharmacy enters all medication orders into a pharmacy-based computerized processing system when the order is received in the pharmacy. One hundred eleven of the 142 reporting hospitals (78%) answered affirmatively.

Hospitals were also asked if they had evaluated the feasibility of adopting a Computerized Prescriber Order Entry (CPOE) system. Of the 77 hospitals (54%) that responded "yes," 28 said they planned to proceed with the acquisition by January 1, 2004. Nine said they plan to proceed after January 1, 2004. Five said they would await HIPAA compliance clarification before making a decision. The remaining 35 said they decided not to purchase a CPOE system. Sixteen of those who decided not to purchase based their decision on the cost of the CPOE system and the lack of an acceptable product. Five stated only cost; four stated only the lack of an acceptable product.

Sixty-one percent of the reporting hospitals (86 of 142) indicated they had implemented a plan during the previous 12 to 18 months to eliminate the use of abbreviations and symbols when ordering medication.

SECTION IV. Comparative Data

The Department of Health and Family Services, Bureau of Health Information, uses volume groups and analysis areas to perform comparative analyses among hospitals.

Volume groups are constructed annually to enable comparisons among hospitals with similar numbers of patients. Volume groups are defined according to total hospital patient volume (discharges adjusted to include both inpatients and outpatients). GMS hospitals have been divided into seven volume groups ranging from the lowest (volume group 1) to the highest (volume group 7). All specialty hospitals are counted in volume group 8, regardless of their total hospital patient volume. Due to the long-term care nature of the services provided by Lakeview NeuroRehab Center Midwest in Waterford, it has also been included in volume group 8 to avoid inappropriate comparisons to other hospitals.

Volume group 1 includes up to 2,000 adjusted discharges, volume group 2 from 2,001 to 3,000, volume group 3 from 3,001 to 5,000, volume group 4 from 5,001 to 8,000, volume group 5 from 8,001 to 14,000, volume group 6 from 14,001 to 21,000, and volume group 7 21,001 or more. Refer to Appendix 1, Glossary of Terms, for a definition of volume groups and to Appendix 5 for the volume group assigned to each hospital.

Note: The volume groups used in this report differ from the inpatient volume groups used in the **Health Care Data Report**. There are seven GMS volume groups used in the **Guide to Wisconsin Hospitals** versus six in the **Health Care Data Report**. Inpatient volume groups used in the **Health Care Data Report** are weighted by DRG, and based only on inpatient data. The volume

groups in the **Guide**, however, take into account both outpatient and inpatient utilization.

Analysis areas are based on groups of counties originally established as health planning districts for the federal and state governments. BHI modified the original seven analysis areas to create two additional subareas, totaling nine hospital market areas. Analysis areas are used to compare hospitals within a particular geographic area. See Appendix 4 for a map that shows the analysis areas.

Tables 17 and 18 provide comparative data on inpatient services at GMS hospitals, by volume group and analysis area.

Tables 19 through 21 provide comparative data on selected ancillary and other services for all hospital types, and by volume group and analysis area for GMS hospitals.

Tables 22 and 23 list the number of medical staff by selected specialty for GMS hospitals, by volume group and analysis area. Table 24 lists the number of medical staff by selected specialty for the psychiatric, AODA, state-operated mental health, and rehabilitation facilities. Since physicians may practice in several areas, double counting may occur from one area to another. The notation “# Staff” includes both non-certified and board-certified staff.

Note: Definitions for terms used in the following tables are found in either the Glossary of Terms (Appendix 1), or the Instructions and Definitions sections of the 2002 Annual Survey of Hospitals survey instrument (Appendix 3).



Wisconsin Counties by Analysis Area

Analysis Area 1

Columbia
Dane
Dodge
Grant
Green
Iowa
Jefferson
Lafayette
Richland
Rock
Sauk

Analysis Area 2A

Kenosha
Ozaukee
Racine
Walworth
Washington
Waukesha

Analysis Area 2B

Milwaukee

Analysis Area 3

Calumet
Fond du Lac
Green Lake
Marquette
Outagamie
Waupaca
Waushara
Winnebago

Analysis Area 4

Brown
Door
Kewaunee
Manitowoc
Marinette
Menominee
Oconto
Shawano
Sheboygan

Analysis Area 5A

Barron
Chippewa
Clark
Dunn
Eau Claire
Pepin
Pierce
Polk
Rusk
St. Croix

Analysis Area 5B

Buffalo
Crawford
Jackson
La Crosse
Monroe
Trempealeau
Vernon

Analysis Area 6

Adams
Florence
Forest
Juneau
Langlade
Lincoln
Marathon
Oneida
Portage
Taylor
Vilas
Wood

Analysis Area 7

Ashland
Bayfield
Burnett
Douglas
Iron
Price
Sawyer
Washburn

Table 17. GMS Hospitals Providing Selected Inpatient Services, by Volume Group, Wisconsin, FY 2002

Volume Group								
	Total	1	2	3	4	5	6	7
Hospitals	127	19	13	24	16	20	19	16
General medical-surgical:								
Adult medical-surgical, acute	121	15	13	23	16	20	18	16
Orthopedics	112	13	12	19	15	19	18	16
Rehabilitation & physical medicine	73	10	6	14	8	9	13	13
Hospice	54	5	8	8	10	9	6	8
Acute Long Term Care	13	5	0	1	1	1	1	4
Other acute care	8	1	1	0	1	1	1	3
Pediatrics	116	14	13	22	15	20	17	15
Obstetrics	101	5	7	22	16	20	17	14
Psychiatric	40	1	2	3	1	8	15	10
AODA	40	3	2	6	3	8	11	7
Intensive care:								
Medical-surgical ICU	98	7	8	16	14	20	18	15
Cardiac ICU	92	6	5	15	14	18	18	16
Pediatric ICU	40	0	3	5	5	9	8	10
Burn care	17	1	1	4	3	1	2	5
Mixed ICU	76	5	4	13	14	18	14	8
Step-down care	62	4	2	9	8	11	15	13
Neonatal Intensive/Intermediate	22	1	0	1	0	1	10	9
Other ICU	7	1	0	0	0	1	1	4
Other inpatient	11	3	0	2	2	1	2	1
Subacute care	16	3	1	3	4	1	2	2
Newborn nursery	101	5	7	22	16	20	17	14

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 18. GMS Hospitals Providing Selected Inpatient Services, by Analysis Area, Wisconsin, FY 2002

Analysis Area										
	Total	1	2A	2B	3	4	5A	5B	6	7
Hospitals	128	23	14	15	12	13	20	11	13	7
General medical-surgical:										
Adult medical-surgical, acute	121	23	12	11	11	13	20	11	13	7
Orthopedics	113	21	12	12	11	12	17	11	11	6
Rehabilitation & physical medicine	74	16	6	9	7	9	10	6	6	5
Hospice	54	12	5	4	7	8	3	6	4	5
Acute Long Term Care	14	1	2	8	0	2	0	0	1	0
Other acute care	8	2	1	2	0	1	1	1	0	0
Pediatrics	117	23	13	9	11	12	19	11	13	6
Obstetrics	101	20	11	8	8	12	17	9	10	6
Psychiatric	40	10	5	5	4	3	5	2	5	1
AODA	40	8	6	3	3	2	6	7	3	2
Intensive care:										
Medical-surgical ICU	98	21	11	12	9	11	14	4	10	6
Cardiac ICU	92	18	11	11	9	10	14	4	10	5
Pediatric ICU	40	10	3	3	6	4	6	2	6	0
Burn care	17	3	0	2	1	1	3	2	5	0
Mixed ICU	76	15	11	3	9	10	12	3	9	4
Step-down care	62	11	11	10	6	7	6	5	5	1
Neonatal Intensive/Intermediate	22	2	4	6	2	1	3	2	2	0
Other ICU	7	3	0	3	1	0	0	0	0	0
Other inpatient	12	2	3	1	0	0	3	3	0	0
Subacute care	16	1	1	1	4	1	3	3	1	1
Newborn nursery	101	20	11	8	8	12	17	9	10	6

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 19. Hospitals Providing Selected Ancillary and Other Services, by Hospital Type, Wisconsin, FY 2001

	Type					
	Total	GMS	Psych	AODA	Rehab	State
Hospitals	142	128	10	1	1	2
AIDS – specialized program for AIDS/ARC	9	9	0	0	0	0
Alcoholism/chemical dependency	44	36	7	1	0	0
Ambulance/transportation services:						
Nonemergency ground transfer	16	16	0	0	0	0
Nonemergency air transfer	1	1	0	0	0	0
Arthritis treatment center	21	20	0	0	1	0
Assisted living	10	10	0	0	0	0
Auxiliary	91	90	1	0	0	0
Birthing room/LDRP	101	101	0	0	0	0
Cardiac services:						
Angioplasty	29	29	0	0	0	0
Cardiac catheter laboratory	39	39	0	0	0	0
Cardiac rehabilitation program	108	108	0	0	0	0
Noninvasive cardiac assessment	102	101	0	0	1	0
Open-heart surgery	24	24	0	0	0	0
Case Management	96	89	5	0	1	1
Crisis Prevention	36	30	5	0	0	1
Complementary Medicine	37	37	0	0	0	0
Dialysis services:						
Hemodialysis	33	33	0	0	0	0
Peritoneal dialysis	45	45	0	0	0	0
Emergency/urgent care:						
Emergency department	119	119	0	0	0	0
Trauma center	58	58	0	0	0	0
Urgent care center	68	68	0	0	0	0
Ethics committee	122	116	4	0	1	1
Extracorporeal shock wave lithotripter	27	27	0	0	0	0
Fitness center	55	55	0	0	0	0
Food service:						
Meals on wheels	47	47	0	0	0	0
Nutrition programs	117	110	6	0	0	1
Genetic counseling/screening	12	12	0	0	0	0

Table 19. Hospitals Providing Selected Ancillary and Other Services, by Hospital Type, Wisconsin, FY 2002 (continued)

	Type					
	Total	GMS	Psych	AODA	Rehab	State
Hospitals	142	128	10	1	1	2
Geriatric services:						
Adult day care program	19	19	0	0	0	0
Alzheimer's diagnosis/assessment	30	26	2	0	1	1
Comprehensive geriatric assessment	43	36	5	0	1	1
Emergency response system	81	79	1	0	0	1
Geriatric acute care unit	43	39	4	0	0	0
Geriatric clinics	20	17	3	0	0	0
Respite care	61	61	0	0	0	0
Retirement housing	11	11	0	0	0	0
Senior membership program	31	31	0	0	0	0
Health promotion:						
Community health promotion	127	119	5	1	1	1
Patient education	132	123	5	1	1	2
Worksite health promotion	107	105	0	0	0	2
Home health service	29	29	0	0	0	0
Home hospice program	18	18	0	0	0	0
Mammography services:						
Diagnostic mammography	110	110	0	0	0	0
Mammography screening	108	108	0	0	0	0
Occupational health services	97	96	0	0	1	0
Occupational/physical & rehabilitation:						
Audiology	58	56	0	0	1	1
Occupational therapy	127	118	6	0	1	2
Physical therapy	128	125	1	0	1	1
Recreational therapy	70	60	7	0	1	2
Rehabilitation inpatient	91	88	1	0	1	1
Rehabilitation outpatient	111	108	2	0	1	0
Respiratory therapy	121	121	0	0	0	0
Speech pathology	100	96	1	0	1	2
Oncology services	87	87	0	0	0	0
Outpatient services:						
Within the hospital	134	125	7	1	1	0
On campus freestanding center	16	15	1	0	0	0
Freestanding center off campus	46	41	4	0	1	0

Table 19. Hospitals Providing Selected Ancillary and Other Services, by Hospital Type, Wisconsin, FY 2002 (continued)

	Type					
	Total	GMS	Psych	AODA	Rehab	State
Hospitals	142	128	10	1	1	2
Pain Management Program	87	85	0	0	0	2
Patient representative	103	96	4	0	1	2
Psychiatric services:						
Child/adolescent services	42	31	9	0	0	2
Consultation-liaison services	59	51	5	0	1	2
Education services	40	32	6	0	0	2
Emergency services	52	47	5	0	0	0
Geriatric services	53	42	8	0	1	2
Outpatient services	48	40	7	0	0	1
Partial hospitalization program	29	22	6	0	0	1
Radiation therapy	30	30	0	0	0	0
Radiology, diagnostic:						
CT scanner	114	114	0	0	0	0
Diagnostic radioisotope facility	67	67	0	0	0	0
Magnetic resonance imaging (MRI)	64	64	0	0	0	0
Positron emission tomography (PET)	10	10	0	0	0	0
SPECT	50	50	0	0	0	0
Ultrasound	102	102	0	0	0	0
Reproductive health:						
Fertility counseling	16	16	0	0	0	0
In vitro fertilization	5	5	0	0	0	0
Social work services	128	116	9	0	1	2
Sports medicine clinic/services	87	86	0	0	1	0
Surgery, ambulatory or outpatient	120	120	0	0	0	0
Transplant services:						
Bone marrow transplant	6	6	0	0	0	0
Heart/lung transplant	4	4	0	0	0	0
Kidney transplant	5	5	0	0	0	0
Tissue transplant	6	6	0	0	0	0
Women's health center/services	56	56	0	0	0	0

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 20. GMS Hospitals Providing Selected Ancillary and Other Services, by Volume Group, Wisconsin, FY 2002

	Volume Group							
	Total	1	2	3	4	5	6	7
Hospitals	127	19	13	24	16	20	19	16
AIDS – specialized program for AIDS/ARC	9	0	0	0	1	0	3	5
Alcoholism/chemical dependency	36	0	2	3	3	8	12	8
Ambulance/transportation services:								
Nonemergency ground transfer	16	2	3	3	2	2	1	3
Nonemergency air transfer	1	0	0	0	0	0	0	1
Arthritis treatment center	20	0	0	1	0	2	9	8
Assisted living	10	1	0	2	3	3	1	0
Auxiliary	90	9	10	18	15	15	11	12
Birthing room/LDRP	101	9	10	14	14	20	19	15
Cardiac services:								
Angioplasty	29	0	0	0	0	3	12	14
Cardiac catheter laboratory	39	0	0	0	1	7	16	15
Cardiac rehabilitation program	107	10	12	18	16	18	17	16
Noninvasive cardiac assessment	101	9	10	14	14	20	19	15
Open-heart surgery	24	0	0	0	0	1	9	14
Case management	88	9	10	13	10	15	17	14
Crisis prevention	29	2	1	2	3	5	9	7
Complementary Medicine	36	1	0	4	6	8	10	7
Dialysis services:								
Hemodialysis	33	1	0	1	6	5	11	9
Peritoneal dialysis	44	4	0	3	4	9	11	13
Emergency/urgent care:								
Emergency department	119	14	12	23	16	20	19	15
Trauma center	58	5	5	5	7	10	13	13
Urgent care center	68	6	8	12	10	11	11	10
Ethics committee	115	12	12	21	15	20	19	16
Extracorporeal shock wave lithotripter	27	0	1	1	0	8	9	8
Fitness center	54	4	1	9	11	10	10	9
Food service:								
Meals on wheels	47	4	3	12	7	8	8	5
Nutrition programs	109	11	11	20	14	19	18	16
Genetic counseling/screening	12	0	0	0	0	1	6	5

Table 20. GMS Hospitals Providing Selected Ancillary and Other Services, by Volume Group, Wisconsin, FY 2002 (continued)

	Volume Group							
	Total	1	2	3	4	5	6	7
Hospitals	127	19	13	24	16	20	19	16
Geriatric services:								
Adult day care program	19	1	4	6	3	2	1	2
Alzheimer's diagnosis/assessment	26	1	4	2	1	4	7	7
Comprehensive geriatric assessment	36	5	3	4	3	5	8	8
Emergency response system	79	5	6	15	13	17	13	10
Geriatric acute care unit	39	4	2	3	6	6	9	9
Geriatric clinics	17	0	1	1	3	2	5	5
Respite care	61	11	10	15	9	9	1	6
Retirement housing	11	2	2	3	2	1	1	0
Senior membership program	31	1	0	1	3	2	14	10
Health promotion:								
Community health promotion	119	16	12	23	16	20	18	14
Patient education	122	17	13	23	16	20	18	15
Worksite health promotion	104	14	10	21	12	20	15	12
Home health service	29	2	4	4	6	7	1	5
Home hospice program	18	0	1	5	5	3	1	3
Mammography services:								
Diagnostic mammography	110	12	13	20	15	20	16	14
Mammography screening	108	12	12	21	14	20	15	14
Occupational health services	96	8	12	19	12	16	15	14
Occupational/physical & rehabilitation:								
Audiology	56	5	4	9	7	8	13	10
Occupational therapy	117	15	10	22	16	20	18	16
Physical therapy	124	17	13	24	16	20	18	16
Recreational therapy	59	6	7	4	5	6	17	14
Rehabilitation inpatient	87	12	7	17	14	12	12	13
Rehabilitation outpatient	107	12	12	19	15	17	17	15
Respiratory therapy	120	17	10	22	16	20	19	16
Speech pathology	95	13	7	12	13	19	18	13
Oncology services	87	3	6	14	12	18	18	16
Outpatient services:								
Within the hospital	124	16	13	24	16	20	19	16
On campus freestanding center	15	1	3	1	0	2	5	3
Freestanding center off campus	41	1	5	3	4	8	10	10

Table 20. GMS Hospitals Providing Selected Ancillary and Other Services, by Volume Group, Wisconsin, FY 2002 (continued)

	Volume Group							
	Total	1	2	3	4	5	6	7
Hospitals	127	19	13	24	16	20	19	16
Pain Management Program	84	5	5	14	14	14	17	15
Patient representative	95	15	11	13	10	16	17	13
Psychiatric services:								
Child/adolescent services	30	2	1	0	0	5	13	9
Consultation-liaison services	50	6	2	1	2	12	15	12
Education services	31	2	1	0	0	5	13	10
Emergency services	47	3	2	4	4	10	13	11
Geriatric services	42	3	2	2	1	8	14	12
Outpatient services	39	2	2	3	3	8	13	8
Partial hospitalization program	22	1	0	1	0	3	9	8
Radiation Therapy	30	0	0	0	1	6	12	11
Radiology, diagnostic:								
CT scanner	114	12	12	22	16	20	19	13
Diagnostic radioisotope facility	67	0	3	5	10	17	17	15
Magnetic resonance imaging (MRI)	64	2	2	10	7	15	18	10
Positron emission tomography (PET)	10	0	0	0	0	1	3	6
SPECT	50	0	2	0	8	14	12	14
Ultrasound	102	6	11	20	13	19	19	14
Reproductive health:								
Fertility counseling	16	0	0	1	1	2	6	6
In vitro fertilization	5	0	0	0	0	0	2	3
Social work services	115	13	11	21	15	20	19	16
Sports medicine clinic/services	86	4	10	17	13	16	16	10
Surgery, ambulatory or outpatient	120	12	13	24	16	20	19	16
Transplant services:								
Bone marrow transplant	6	0	0	0	0	0	1	5
Heart/lung transplant	4	0	0	0	0	0	1	3
Kidney transplant	5	0	0	0	0	1	1	3
Tissue transplant	6	0	0	1	0	1	1	3
Women's health center/services	56	1	5	5	6	12	15	12

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services

Table 21. Hospitals Providing Selected Ancillary and Other Services, by Analysis Area, Wisconsin, FY 2002

	Analysis Area									
	Total	1	2A	2B	3	4	5A	5B	6	7
Hospitals	142	24	16	19	14	16	20	11	15	7
AIDS - specialized program for AIDS/ARC	9	2	0	5	0	1	0	1	0	0
Alcoholism/chemical dependency	44	9	4	8	5	5	3	3	5	2
Ambulance/transportation services:										
Non-emergency ground transfer	16	2	0	0	2	2	3	2	5	0
Non-emergency air transfer	1	0	0	0	0	0	0	0	1	0
Arthritis treatment center	21	5	1	8	2	1	0	2	2	0
Assisted living	10	2	1	0	2	0	0	2	3	0
Auxiliary	91	19	8	5	11	10	14	9	9	6
Birthing room/LDRP	101	19	11	9	8	12	17	9	10	6
Cardiac services:										
Angioplasty	29	4	3	9	4	4	1	2	2	0
Cardiac catheter laboratory	39	6	4	10	5	6	2	2	4	0
Cardiac rehabilitation program	108	20	10	9	10	13	18	10	13	5
Non-invasive cardiac assessment	102	21	12	11	11	12	14	4	12	5
Open-heart surgery	24	4	2	9	3	2	1	1	2	0
Case management	96	16	14	16	11	10	12	5	8	4
Crisis prevention	36	7	7	10	3	2	3	1	3	0
Complementary Medicine	37	9	6	9	1	2	5	3	2	0
Dialysis services:										
Hemodialysis	33	6	5	5	2	4	3	3	5	0
Peritoneal dialysis	45	7	9	10	1	5	5	2	6	0
Emergency/urgent care:										
Emergency department	119	23	12	11	11	12	19	11	13	7
Trauma center	58	13	7	7	8	6	7	5	4	1
Urgent care center	68	19	3	6	9	11	5	6	6	3
Ethics committee	122	22	15	17	9	12	19	10	12	6
Extracorporeal shock wave lithotripter	27	3	6	6	2	4	2	1	3	0
Fitness center	55	11	6	6	5	5	10	4	7	1
Food service:										
Meals on wheels	47	10	5	0	7	4	6	6	7	2
Nutrition programs	117	20	15	15	9	13	16	10	14	5
Genetic counseling/screening	12	3	1	5	1	1	1	0	0	0

Table 21. Hospitals Providing Selected Ancillary and Other Services, by Analysis Area, Wisconsin, FY 2002 (continued)

Analysis Area										
	Total	1	2A	2B	3	4	5A	5B	6	7
Hospitals	142	24	16	19	14	16	20	11	15	7
Geriatric services:										
Adult day care program	19	5	2	0	1	2	2	2	4	1
Alzheimer's diagnosis/assessment	30	9	3	7	2	1	5	1	2	0
Comprehensive geriatric assessment	43	13	7	9	2	2	4	2	2	2
Emergency response system	81	17	9	8	10	8	10	5	10	4
Geriatric acute care unit	43	7	8	9	5	5	3	2	2	2
Geriatric clinics	20	5	2	8	2	1	0	0	1	1
Respite care	61	13	4	2	4	6	10	8	10	4
Retirement housing	11	1	0	0	1	1	4	2	2	0
Senior membership program	31	5	5	9	4	3	1	2	2	0
Health promotion:										
Community health promotion	127	22	14	14	13	15	20	9	13	7
Patient education	132	24	15	15	13	15	20	9	14	7
Worksite health promotion	107	21	12	10	11	10	17	9	10	7
Home health service	29	9	1	1	3	5	3	2	2	3
Home hospice program	18	2	1	1	2	3	2	4	2	1
Mammography services:										
Diagnostic mammography	110	23	11	9	11	13	18	7	11	7
Mammography screening	108	23	10	10	11	13	17	6	11	7
Occupational health services	97	16	8	11	9	10	17	9	12	5
Occupational/physical & rehabilitation:										
Audiology	58	19	4	9	8	6	4	2	5	1
Occupational therapy	127	24	14	16	12	15	15	11	14	6
Physical therapy	128	23	13	15	12	13	20	11	14	7
Recreational therapy	70	14	9	11	7	8	6	6	8	1
Rehabilitation inpatient	91	19	8	13	10	10	10	8	10	3
Rehabilitation outpatient	111	22	12	14	10	10	15	10	13	5
Respiratory therapy	121	23	13	14	12	13	17	11	12	6
Speech pathology	100	20	13	15	9	12	8	8	11	4
Oncology services	87	20	8	11	9	10	10	4	10	5
Outpatient services:										
Within the hospital	134	23	15	16	12	16	20	11	14	7
On campus freestanding center	16	3	3	5	1	1	2	1	0	0
Freestanding center off campus	46	13	5	11	1	7	4	1	4	0
Pain Management Program	87	17	11	13	10	11	10	4	9	2
Patient representative	103	17	11	15	10	11	17	8	9	5

Table 21. Hospitals Providing Selected Ancillary and Other Services, by Analysis Area, Wisconsin, FY 2002 (continued)

	Analysis Area									
	Total	1	2A	2B	3	4	5A	5B	6	7
Hospitals	142	24	16	19	14	16	20	11	15	7
Psychiatric services:										
Child/adolescent services	42	7	5	9	6	4	3	1	6	1
Consultation-liaison services	59	9	11	15	5	4	4	3	7	1
Education services	40	7	6	8	4	5	2	2	5	1
Emergency services	52	10	5	7	6	6	5	4	7	2
Geriatric services	53	11	6	10	7	5	4	2	7	1
Outpatient services	48	9	5	10	6	6	3	3	5	1
Partial hospitalization program	29	3	5	7	3	1	1	3	5	1
Radiation therapy	30	3	6	7	4	4	2	0	4	0
Radiology, diagnostic:										
CT scanner	114	23	12	10	11	12	18	9	12	7
Diagnostic radioisotope facility	67	13	10	10	8	11	5	1	7	2
Magnetic resonance imaging (MRI)	64	12	9	10	6	6	7	4	8	2
Positive emission tomography (PET)	10	3	1	1	1	1	1	0	2	0
SPECT	50	11	7	9	3	7	2	1	9	1
Ultrasound	102	20	12	10	11	13	14	4	12	6
Reproductive health:										
Fertility counseling	16	4	1	5	2	2	1	0	1	0
In vitro fertilization	5	1	0	3	1	0	0	0	0	0
Social work services	128	24	15	16	12	12	18	11	13	7
Sports medicine clinic/services	87	14	9	11	9	8	14	6	11	5
Surgery, ambulatory or outpatient	120	23	12	11	11	13	20	10	13	7
Surgical services:										
Bone marrow transplant	6	1	0	4	0	0	0	0	1	0
Heart/lung transplant	4	1	0	3	0	0	0	0	0	0
Kidney transplant	5	1	0	3	0	1	0	0	0	0
Tissue transplant	6	1	0	3	0	1	1	0	0	0
Women's health center/services	56	12	6	8	8	7	6	2	6	1

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 22. GMS Hospital Medical Staff by Selected Specialty, by Volume Group, Wisconsin, FY 2002

Specialty	Total		Volume Group 1		Volume Group 2		Volume Group 3	
	Number of Staff	Board Certified	Number of Staff	Board Certified	Number of Staff	Board Certified	Number of Staff	Board Certified
Total staff	18,393	16,085	941	846	396	334	672	617
Medical specialty:								
General and family practice	2,554	2,285	140	124	82	69	231	217
Internal medicine (general)	1,953	1,569	99	86	23	22	54	48
Internal medicine subspecialties	2,799	2,602	196	192	25	24	59	58
Pediatrics	1,080	962	29	28	4	3	7	7
Pediatric subspecialties	325	302	12	12	0	0	0	0
Surgical Specialty:								
General surgery	855	742	39	36	28	25	47	41
Obstetrics/Gynecology	897	790	16	16	9	9	17	17
All other surgical specialties	2,946	2,594	128	120	92	88	129	128
Other Specialty:								
Anesthesiology	870	750	37	36	37	21	11	10
Emergency medicine	917	782	60	46	22	14	48	34
Pathology	448	426	20	17	14	14	33	33
Radiology	1,137	1,092	70	66	30	28	115	113
All other specialties	1,274	879	95	67	30	17	59	56

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 22. GMS Medical Staff by Selected Specialty, by Volume Group, Wisconsin, FY 2002 (continued)

Specialty	Volume Group 4		Volume Group 5		Volume Group 6		Volume Group 7	
	Number of Staff	Board Certified	Number of Staff	Board Certified	Number of Staff	Board Certified	Number of Staff	Board Certified
Total staff	672	617	2,064	1,763	5,958	5,251	7,552	6,512
Medical specialty:								
General and family practice	234	221	302	261	702	645	863	748
Internal medicine (general)	83	71	220	191	715	519	759	632
Internal medicine subspecialties	29	28	213	188	960	899	1,317	1,213
Pediatrics	17	16	113	95	444	412	466	401
Pediatric subspecialties	0	0	11	7	124	119	178	164
Surgical Specialty:								
General surgery	52	45	98	82	295	250	296	263
Obstetrics/Gynecology	24	23	105	88	347	315	379	322
All other surgical specialties	92	82	353	305	1,046	932	1,106	939
Other Specialty:								
Anesthesiology	16	16	91	70	237	217	441	380
Emergency medicine	37	32	202	176	275	253	273	227
Pathology	20	20	88	85	113	108	160	149
Radiology	33	33	157	151	296	285	436	416
All other specialties	35	30	111	64	404	297	540	348

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 23. GMS Hospital Medical Staff by Selected Specialty, by Analysis Area, Wisconsin, FY 2002

Specialty	Total		Analysis Area 1		Analysis Area 2A		Analysis Area 2B		Analysis Area 3	
	Number of Staff	Board Certified	Number of Staff	Board Certified	Number of Staff	Board Certified	Number of Staff	Board Certified	Number of Staff	Board Certified
Total staff	18,400	16,092	2,495	2,224	3,009	2,653	5,818	5,076	1,872	1,748
Medical specialty:										
General and family practice	2,554	2,285	448	400	355	321	484	419	337	324
Internal medicine (general)	1,954	1,570	219	202	257	229	814	568	139	130
Internal medicine subspecialties	2,799	2,602	366	352	483	431	1,115	1,063	282	267
Pediatrics	1,082	964	141	112	167	152	446	409	86	82
Pediatric subspecialties	325	302	62	59	53	47	118	118	33	31
Surgical Specialty:										
General surgery	855	742	127	108	102	99	300	251	62	58
Obstetrics/Gynecology	897	790	120	94	158	143	330	294	67	64
All other surgical specialties	2,946	2,594	340	303	565	497	861	766	355	325
Other Specialty:										
Anesthesiology	870	750	87	78	164	148	336	284	78	74
Emergency medicine	917	782	110	99	218	199	243	207	66	62
Pathology	448	426	68	66	84	78	141	131	33	33
Radiology	1,137	1,092	207	197	200	197	303	298	151	146
All other specialties	1,278	883	200	134	203	112	327	268	183	152

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 23. GMS Hospital Medical Staff by Selected Specialty, by Analysis Area, Wisconsin, FY 2002 (continued)

Specialty	Analysis Area 4		Analysis Area 5A		Analysis Area 5B		Analysis Area 6		Analysis Area 7	
	Number of Staff	Board Certified	Number of Staff	Board Certified	Number of Staff	Board Certified	Number of Staff	Board Certified	Number of Staff	Board Certified
Total staff	1,941	1,541	1,046	934	635	569	1,396	1,181	188	166
Medical specialty:										
General and family practice	282	227	238	221	106	98	234	209	70	66
Internal medicine (general)	222	174	69	63	21	18	196	171	17	15
Internal medicine subspecialties	231	202	84	82	22	18	211	183	5	4
Pediatrics	120	87	30	28	11	11	79	62	2	1
Pediatric subspecialties	32	20	1	1	5	5	21	21	0	0
Surgical Specialty:										
General surgery	104	88	60	54	18	16	69	57	13	11
Obstetrics/Gynecology	113	99	42	40	5	5	58	47	4	4
All other surgical specialties	390	307	187	180	21	20	209	180	18	16
Other Specialty:										
Anesthesiology	70	64	74	55	5	2	52	42	4	3
Emergency medicine	130	110	40	25	11	7	73	52	26	21
Pathology	30	29	41	40	8	8	38	36	5	5
Radiology	59	52	102	94	36	34	64	59	15	15
All other specialties	158	82	78	51	28	17	92	62	9	5

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 24. Specialty Hospital Medical Staff by Selected Specialty, Wisconsin, FY 2002

	Psychiatric		AODA		Rehab		State	
	Number of Staff	Board Certified	Number of Staff	Board Certified	Number of Staff	Board Certified	Number of Staff	Board Certified
Hospitals	10 Hospitals		1 Hospital		1 Hospital		2 Hospitals	
Total staff	247	180	8	8	102	95	39	28
Medical specialty:								
General and family practice	15	12	7	7	14	14	3	1
Internal medicine (general)	10	7	0	0	11	8	3	3
Internal medicine subspecialties	16	16	0	0	33	32	0	0
Pediatrics	9	8	9	9	0	0	1	0
Pediatric subspecialties	0	0	0	0	0	0	0	0
Surgical Specialty:								
General surgery	0	0	0	0	3	3	0	0
Obstetrics/Gynecology	0	0	0	0	0	0	0	0
All other surgical specialties	0	0	0	0	20	18	0	0
Other Specialty:								
Anesthesiology	0	0	0	0	3	3	0	0
Emergency medicine	0	0	0	0	0	0	0	0
Pathology	0	0	0	0	0	0	0	0
Radiology	0	0	0	0	0	0	0	0
All other specialties	197	136	1	1	17	16	32	24

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services

SECTION V. How to Read the Tables

Statewide Averages and Comparison Group Tables

Tables 26 through 29 in Section V provide statewide averages for utilization and financial measures at GMS, psychiatric and AODA hospitals. The measures listed are the same as those used on the individual hospital tables (Section VII). This allows comparison of individual hospital statistics to statewide averages. For GMS hospitals, the summary tables provide data for FY 2002 and FY 2001. For psychiatric and AODA hospitals, the tables contain FY 2002 data for “all psychiatric hospitals” and “all AODA hospitals” as separate categories. Refer to Appendix 1 for the definition of the measures used in these tables.

Tables 30 through 33 present utilization and financial statistics for GMS hospitals by volume group and analysis area. These tables provide the group averages that form the basis of the ratios listed in the individual hospital tables in Section VII.

Individual Hospital Tables

Section VII consists of tables that profile each individual hospital. These tables are grouped by hospital type. Within each type, hospitals are listed in alphabetical order by city and by hospital name within city.

Each hospital table contains three pages of information. The first two pages list facility

utilization and staffing information that has been drawn primarily from each hospital’s completed 2002 Annual Survey of Hospitals. The third page contains financial data extracted from each hospital’s FY 2002 Hospital Fiscal Survey.

Special Note on the Hospital Tables

If the hospital did not provide a given service, or if the calculation of ratios is not mathematically possible, a dash (-) has been entered in the tables. Zeros have been used to record service counts and percents that are actually zero. The tables list a calculated variable as “N/A” if missing data make it impossible to compute the calculated variable.

A comparative ratio is calculated by dividing the individual hospital’s statistic by the comparison group average. If the hospital’s statistic is greater than the comparison group average, the ratio will be greater than 1.00; if it is equal, the ratio will be 1.00; if it is less than the comparison group average, the ratio will be less than 1.00. The tables list “#” if the ratio computed would have been a negative number.

For example, if the total occupancy rate for a facility is 63.4 percent and the GMS hospital average is 54.5 percent, the ratio would be 1.17. This means the total occupancy rate at the facility is 17 percent greater than the average for all GMS hospitals.

Table 25. Hospitals Not Included in this Report

Action	Name of Hospital	City	FY 2002 Hospital Fiscal Survey	2002 Annual Survey of Hospitals
Change in Fiscal Year	Eagle River Memorial Hospital	Eagle River	Partial-year data on paper survey (not in computer data set)	Partial-year data on paper survey (not in computer data set)
Facility Closure	Rock County Psychiatric Hospital	Janesville	Closed operations	Closed operations
Change in Fiscal Year	United Hospital System- Kenosha Medical Center Campus	Kenosha	Partial-year data on paper survey (not in computer data set)	Partial-year data on paper survey (not in computer data set)
Facility Closure	United Hospital System- St. Catherine's Medical Center Campus	Kenosha	Closed temporarily for reconstruction in 2000	Closed temporarily for reconstruction in 2000; will re-open after service consolidation with Kenosha Medical Center campus
Change in Fiscal Year	Howard Young Medical Center, Inc.	Woodruff	Partial-year data on paper survey (not in computer data set)	Partial-year data on paper survey (not in computer data set)
New Facility	Columbia Center, LLC	Milwaukee	Partial-year data on paper survey (not in computer data set)	Partial-year data on paper survey (not in computer data set)
New Facility	Select Specialty Hospital- Milwaukee St. Luke's Campus	Milwaukee	Partial-year data on paper survey (not in computer data set)	Partial-year data on paper survey (not in computer data set)

First Page of the Hospital Tables

Header: The top of the first page of each hospital table identifies basic facility information including the following: name and address of the hospital, hospital type, type of control (i.e., proprietary, religious organization, municipal, other nonprofit), hospital reporting period, and the applicable county, analysis area, and volume group.

Selected Utilization Statistics: These columns consist of selected utilization and operational

statistics. These data include measures of occupancy, average census, and average length of stay by selected service area; the volume of inpatient and outpatient surgeries; the volume of outpatient visits (nonemergency and emergency); the number of full-time equivalent staff in selected categories of hospital personnel; and the number of full-time equivalent personnel per 100 daily patient adjusted census. Adjusted census is a hospital's

average daily census plus an outpatient equivalent of patient days based on total gross outpatient revenue.

Utilization for Total Hospital: At the bottom of the first page are descriptive data indicating the following:

- Number of beds set up and staffed;
- Number of patients discharged;
- Total inpatient days;
- Existence of contracts with prepaid health plans;
- Utilization of Medicare-certified swing beds (GMS hospitals only); and
- Number of bassinets, and utilization data for newborns (GMS hospitals only).

NOTE: Definitions of terms used in the utilization section of the tables appear in the Glossary (Appendix 1).

Second Page of the Hospital Tables

Inpatient Service Areas: The top of the second page of each hospital table presents detailed information on inpatient services provided at that hospital. Broad service categories, such as general medical-surgical and ICU/CCU, are further categorized into component units. For example, general medical-surgical is subdivided into adult medical-surgical, orthopedic, rehabilitation and physical medicine, hospice, long-term acute care and other acute. Within each service category, the following information is provided:

- Level of service, which describes how the service is provided (e.g., distinct unit, by contract);
- Number of beds set up and staffed as of the last day of the hospital's fiscal year;
- Number of discharges and transfers of patients treated;
- Number of inpatient days of care;
- Occupancy rate;
- Average census, number of patients; and
- Average length of stay in days.

The categories "other acute," "other intensive care," and "other" include specialized programs that do not fit into the survey's major categories.

Examples include eating disorder units, long-term respiratory care units, adolescent treatment facilities, and non-ICU beds with monitoring equipment.

Note: The "Inpatient Service Area" columns do not include a line for totals. This is because the numbers are only to be used across rows for calculations within a specific service area. Total hospital figures are available on the first page of each hospital's table.

Personnel on Hospital Payroll as of September 30, 2002: The bottom half of the second page lists the actual number of all full- and part-time hourly and salaried personnel on a hospital's payroll as of September 30, 2002. It excludes nursing home staff and staff who do not provide direct hospital services.

The table also indicates the number of full-time equivalent (FTE) staff in each personnel category. FTEs are calculated by adding the number of full-time staff in a hospital to the figure obtained by dividing the total number of part-time hours worked per week by the length of the individual hospital's work week (usually 35-40 hours).

Third Page of the Hospital Tables

Summary Data from Financial Statements: The section at the top of the third page provides summary income statement (revenue and expenses) and balance sheet information (assets, liabilities, and fund balances) for each hospital's 2002 fiscal year. The income statement provides an overview of a hospital's profitability and the extent to which the facility is funded by sources other than patient revenue (income from unrestricted gifts, donations, endowments, and investments).

Selected Financial Statistics: The bulk of the third page consists of a set of 32 financial statistics grouped into six major analytical categories:

- Gross revenue as a percent of total gross patient revenue;
- Deductions from revenue as a percent of total gross patient revenue;

- Other revenue as a percent of total revenue and net gains or losses as a percent of net income;
- Expenses as a percent of total expenses;
- Fiscal statistics; and
- Net revenue statistics.

Special Financial Information for Combination Facilities

Some hospitals operate in combination with a nursing home. A note of this status will be included on the hospital's table if it had an impact on the fiscal data. The following modifications in data may have occurred at combination facilities:

1. If a hospital is jointly operated in connection with a nursing home, home health agency, or other organization, and the asset, liability, and fund balance data are not available from the hospital's final audited financial statements for the hospital unit alone, the hospital used data from its most recent Medicare Cost Report to derive the required data for the hospital unit for the following:
 - Net patient accounts receivable;
 - Property, plant and equipment; and
 - Long-term debt.
2. If the information is combined on both the hospital financial statement and the Medicare Cost Report, the hospital reported these data based on the total facility.
3. If the assets and funds under the following relate directly to the hospital unit, a hospital reported these data for the hospital unit only; otherwise a hospital reported these data based on the total facility:
 - Other unrestricted assets; and
 - Specific purpose funds.
4. If the hospital unit data could not be separated from the total facility data for the following categories, then a hospital reported these data based on the total facility:
 - Current cash and short-term investments;
 - Inter-corporate account(s);
 - Other current assets;
 - Long-term investments (at lower of cost or market);
 - Current liabilities;
 - Other noncurrent liabilities;

- Unrestricted fund balances;
- Plant replacement and expansion funds; and
- Endowment funds.

To find what combination of data was used for a particular hospital, a copy of the individual hospital's survey form can be obtained.

Differences in Tables by Type of Hospital

General Medical-Surgical Hospital Tables: The columns of data on the first and third pages of individual hospital tables for GMS hospitals compare a hospital's statistics to data for selected comparison groups. The numbers that appear in these columns indicate both the absolute figures and the ratios of the individual hospital's statistics to the averages for each comparison group. In addition, each hospital's data are compared to its 2001 fiscal year data in terms of absolute amounts and a ratio.

Specialty Hospital Tables: The first page of the tables for psychiatric, AODA and state-operated mental health facilities differs from the first page of the GMS hospital tables in the following ways:

- The occupancy rates, average census, and average length of stay under the selected utilization statistics section are calculated only for psychiatric and AODA services.
- The staffing section includes psychologists and social workers instead of ancillary nursing personnel.
- Except for the state-operated mental health institutes, each hospital's data are compared only to data from similar hospitals (not to analysis areas or volume groups). The state-operated mental health institutes are compared only to data from their previous fiscal year.
- On the bottom of the first page, there are no data on swing-bed usage and newborn nursery because these services are not offered in specialty hospitals.

The first page of the rehabilitation hospital tables differs from the first page of the GMS hospital tables in the following ways:

- The occupancy rates, average census, and average length of stay are calculated only for rehabilitation and physical medicine.
- The staffing section includes physical and occupational therapists instead of ancillary nursing personnel.
- The hospital's data are compared only to data from the previous fiscal year.

For all specialty hospitals, the second page is identical to that used for GMS hospitals.

The third page includes the same kind of financial data as for GMS hospitals; however, comparisons are made only to data from similar hospitals for the psychiatric and AODA facilities (not to analysis areas or volume groups) and data from the previous fiscal year. The third page for each of the state-operated mental health institutes and the rehabilitation hospitals compares data only from the previous fiscal year.

SECTION VI. Statewide Averages for Selected Measures of Utilization and Finance

General Medical-Surgical (GMS) Hospitals

Tables 26-27

Psychiatric and Alcohol and Other Drug Abuse (AODA) Hospitals

Tables 28-29

Table 26. **GMS Hospital Averages for Selected Utilization Statistics, Wisconsin, FY 2002 and 2001**

	2002	2001	Ratio
Occupancy Rate (%)			
Adult medical-surgical	59.3	57.2	1.04
Obstetrics	40.2	41.1	0.98
Pediatrics	48.8	41.7	1.17
Total hospital	57.1	55.5	1.03
Average Census (Patients)			
Adult medical-surgical	34.6	34.2	1.01
Obstetrics	4.9	5.0	0.98
Pediatrics	8.9	7.5	1.19
Total hospital	56.5	56.1	1.01
Average Length of Stay (Days)			
Adult medical-surgical	3.3	3.8	0.87
Obstetrics	2.2	2.4	0.92
Pediatrics	3.4	3.9	0.87
Total hospital	3.1	4.1	0.76
Surgical Operations			
Inpatient	1,477	1,478	1.00
Outpatient	3,260	2,963	1.10
Inpatient as % of all surgeries	31.2	33.3	0.94
Outpatient Visits			
Nonemergency visits	74,672	74,742	1.00
Emergency visits	14,113	14,109	1.00
Full Time Equivalents (FTEs)			
Administrators	14.8	12.8	1.16
Nurses, licensed	152.6	143.2	1.07
Ancillary nursing personnel	55.2	54.1	1.02
All other personnel	391.3	371.5	1.05
Total FTEs	624.7	592.9	1.05
FTEs Per 100 Patient Census (Adjusted)			
Administrators	15.3	18.7	0.82
Nurses, licensed	127.7	141.7	0.90
Ancillary nursing personnel	45.4	51.9	0.87
All other personnel	324.3	402.0	0.81
Total FTEs	523.9	630.3	0.83

Source: 2001/2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 27. **GMS Hospital Averages for Selected Financial Statistics, Wisconsin, FY 2002 and 2001**

	2002	2001	Ratio
Gross Rev as % of Total Gross Patient Revenue			
Medicare	41.3	41.9	0.99
Medical Assistance	9.0	8.3	1.08
Commercial	43.5	44.2	0.98
All other	6.1	5.5	1.11
Deductions as % of Total Gross Patient Revenue			
Medicare	23.7	23.0	1.03
Medical Assistance	6.0	5.3	1.13
Commercial	9.5	9.3	1.02
Charity care	1.2	1.1	1.09
All other	1.4	1.1	1.27
Total deductions	41.9	39.8	1.05
Other Revenue and Net Gains or Losses			
Other revenue as % of total revenue	5.2	5.0	1.04
Net gains/losses as % of net income	5.3	14.1	0.38
Expenses as % of Total Expenses			
Salary/fringe benefits	47.7	48.7	0.98
Supplies and services	40.6	39.4	1.03
Capital component	8.7	9.0	0.97
Bad debt	3.0	2.9	1.03
Fiscal Statistics			
Operating margin (%)	6.1	6.6	0.92
Total hospital profit margin (%)	6.4	7.6	0.84
Return on equity (%)	10.0	11.5	0.87
Current ratio	2.5	2.5	1.00
Days in net patient accounts receivable	57.6	63.8	0.90
Average payment period	52.5	52.6	1.00
Equity financing (%)	56.5	57.6	0.98
Long-term debt to equity ratio	0.5	0.5	1.00
Times interest earned	5.0	5.7	0.88
Total asset turnover	0.9	0.9	1.00
Average age of plant (years)	9.5	9.6	0.99
Increase (decrease) total net patient rev (%)	17.0	11.6	1.47
Outpatient gross rev (% of total gross pt rev)	44.0	43.2	1.02
Patient Statistics			
Inpatient net revenue per discharge	\$8,169	\$7,574	1.08
Inpatient net revenue per day	\$1,834	\$1,672	1.10
Outpatient net revenue per visit	\$350	\$308	1.14

Source: FY 2002 *Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 28. Averages for Selected Utilization Statistics at **Psychiatric** and **AODA** Hospitals, Wisconsin, FY 2002

	Psychiatric	AODA
Occupancy Rate (%)		
Psychiatric	62.9	-
Alcoholism/Chemical dependency	30.0	22.7
Total hospital	61.5	22.7
Average Census (Patients)		
Psychiatric	38	0
Alcoholism/Chemical dependency	1	5
Total hospital	38	5
Average Length of Stay (Days)		
Psychiatric	9.0	-
Alcoholism/Chemical dependency	2.9	16.2
Total hospital	8.6	16.2
Outpatient Visits		
Nonemergency visits	28,944	7,674
Emergency visits	1,330	0
Full Time Equivalents (FTEs)		
Administrators	3	4
Nurses, licensed	31	6
Psychologists	3	0
Social Workers	10	0
All other personnel	143	21
Total FTEs	190	31
FTEs Per 100 Patient Census (Adjusted)		
Administrators	6	46
Nurses, licensed	52	66
Psychologists	4	0
Social Workers	18	0
All other personnel	235	242
Total FTEs	315	354

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 29. Averages for Selected Financial Statistics at **Psychiatric** and **AODA** Hospitals, Wisconsin, FY 2002

	Psychiatric	AODA
Gross Rev as % of Total Gross Patient Revenue		
Medicare	14.0	<0.05
Medical Assistance	15.0	50.2
Commercial	31.9	47.5
All other	39.0	2.3
Deductions as % of Total Gross Patient Revenue		
Medicare	7.0	<0.05
Medical Assistance	5.1	11.2
Commercial	11.2	5.9
Charity care	6.4	<0.05
All other	1.6	<0.05
Total deductions	31.3	17.1
Other Revenue and Net Gains or Losses		
Other revenue as % of total revenue	23.0	<0.05
Net gains/losses as % of net income	7.7	<0.05
Expenses as % of Total Expenses		
Salary/fringe benefits	48.9	64.2
Supplies and services	46.4	18.0
Capital component	3.2	13.1
Bad debt	1.6	4.8
Fiscal Statistics		
Operating margin (%)	-0.4	4.1
Total hospital profit margin (%)	-0.4	4.1
Return on equity (%)	-3.2	9.0
Current ratio	2.7	170.2
Days in net patient accounts receivable	39.4	83.4
Average payment period	24.9	1.0
Equity financing (%)	44.6	99.4
Long-term debt to equity ratio	0.6	<0.05
Times interest earned	0.1	N/A
Total asset turnover	3.2	2.2
Average age of plant (years)	6.7	18.7
Increase (decrease) total net patient rev (%)	10.9	-9.3
Outpatient gross rev (% of total gross pt rev)	48.2	37.2
Patient Statistics		
Inpatient net revenue per discharge	\$5,171	\$8,721
Inpatient net revenue per day	\$638	\$539
Outpatient net revenue per visit	\$291	\$93

Source: FY 2002 *Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

SECTION VI. continued

Group Averages for Selected Measures of Utilization – GMS Hospitals

Tables 30-31

Group Averages for Selected Measures of Finance – GMS Hospitals

Tables 32-33

Table 30. **GMS Hospital Averages for Selected Utilization Statistics, by Volume Group, Wisconsin, FY 2002**

	Volume Group						
	1	2	3	4	5	6	7
Occupancy Rate (%)							
Adult medical-surgical	15.9	30.0	33.3	50.4	51.9	58.9	72.5
Obstetrics	5.7	16.4	20.6	30.6	28.1	37.0	58.4
Pediatrics	20.4	6.4	13.4	22.2	20.9	71.9	42.6
Total hospital	31.3	28.9	31.9	47.3	48.2	54.5	68.8
Average Census (Patients)							
Adult medical-surgical	2	6	8	17	28	46	115
Obstetrics	<0.05	<0.05	1	2	3	7	14
Pediatrics	<0.05	<0.05	<0.05	<0.05	<0.05	7	5
Total hospital	9	7	10	23	42	96	219
Average Length of Stay (Days)							
Adult medical-surgical	3.1	3.3	3.3	3.4	3.7	3.9	4.3
Obstetrics	2.1	2.1	2.2	2.3	2.3	2.5	2.4
Pediatrics	1.7	1.8	1.9	2.1	2.3	2.4	2.6
Total hospital	6.8	2.3	3.1	3.5	3.7	4.2	4.9
Surgical Operations							
Inpatient	40	131	308	487	1,556	2,937	5,392
Outpatient	170	735	1,359	1,567	3,467	7,197	9,551
Inpatient as % of all surgeries	19.2	15.1	18.5	23.7	31.0	29.0	36.1
Outpatient Visits							
Nonemergency visits	9,373	23,127	34,462	35,278	77,342	163,578	223,693
Emergency visits	1,922	4,717	7,879	8,464	19,862	25,884	36,965
Full-Time Equivalents (FTEs)							
Administrators	4	4	7	8	18	31	40
Nurses, licensed	18	22	52	56	151	274	564
Ancillary nursing personnel	9	7	20	19	42	109	208
All other personnel	43	63	134	154	422	739	1,363
Total FTEs	77	99	217	241	651	1,174	2,203
FTEs per 100 Patient Census (Adjusted)							
Administrators	103	17	32	14	19	17	12
Nurses, licensed	326	111	222	103	157	153	163
Ancillary nursing personnel	179	36	87	37	44	61	58
All other personnel	736	322	560	285	450	417	390
Total FTEs	1441	499	918	448	690	660	633

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 31. **GMS** Hospital Averages for Selected Utilization Statistics, by Analysis Area, Wisconsin, FY 2002

	Analysis Area								
	1	2A	2B	3	4	5A	5B	6	7
Occupancy Rate (%)									
Adult medical-surgical	55.2	66.8	68.7	54.1	54.6	40.7	54.5	62.1	27.8
Obstetrics	41.3	41.0	49.4	40.5	32.9	25.7	33.3	42.4	16.5
Pediatrics	46.0	19.2	72.4	29.1	26.5	19.5	29.9	53.9	5.0
Total hospital	54.7	62.2	64.8	51.9	49.4	40.7	46.8	64.4	26.0
Average Census (Patients)									
Adult medical-surgical	31	34	71	24	31	14	15	30	11
Obstetrics	4	5	9	4	4	2	2	3	1
Pediatrics	2	1	9	1	1	<0.5	1	1	<0.5
Total hospital	54	66	148	44	51	21	28	52	12
Average Length of Stay (Days)									
Adult medical-surgical	3.7	4.0	4.9	3.6	3.7	3.2	3.4	3.9	3.5
Obstetrics	2.0	2.5	2.8	2.4	2.3	2.3	2.3	2.5	2.2
Pediatrics	3.1	1.8	2.3	2.0	2.7	2.1	2.6	3.0	1.8
Total hospital	4.4	4.5	5.2	4.0	4.0	3.4	3.8	3.9	3.2
Surgical Operations									
Inpatient	1,694	1,612	4,072	1,530	1,749	574	465	1,480	212
Outpatient	3,961	4,178	6,817	4,890	4,343	1,385	1,711	1,841	745
Inpatient as % of all surgeries	30.0	27.8	37.4	23.8	28.7	29.3	21.4	44.6	22.2
Outpatient Visits									
Nonemergency visits	108,040	91,709	217,034	55,738	76,069	36,166	33,009	49,906	21,893
Emergency visits	14,024	17,726	36,940	13,359	20,481	7,189	7,302	11,727	7,123
Full-Time Equivalents (FTEs)									
Administrators	13	15	48	17	18	10	7	12	5
Nurses, licensed	159	177	461	114	180	68	100	131	40
Ancillary nursing personnel	45	50	192	34	63	31	38	67	18
All other personnel	462	484	998	323	472	164	283	332	104
Total FTEs	693	739	1714	501	753	277	439	546	174
FTEs per 100 Patient Census (Adjusted)									
Administrators	20	17	107	19	25	27	51	14	17
Nurses, licensed	143	134	340	154	172	163	242	133	147
Ancillary nursing personnel	45	49	216	48	57	61	93	64	68
All other personnel	424	305	651	380	458	413	713	383	405
Total FTEs	651	515	1,422	612	737	679	1,125	599	666

Source: 2002 Annual Survey of Hospitals, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 32. **GMS** Hospital Averages for Selected Financial Statistics, by Volume Group, Wisconsin, FY 2002

	Volume Group						
	1	2	3	4	5	6	7
Gross Rev as % of Total Gross Patient Rev							
Medicare	58.9	45.6	41.1	46.7	42.6	38.9	41.7
Medical Assistance	10.1	7.8	8.2	7.5	6.9	9.9	9.3
Commercial	26.7	39.7	45.2	39.8	44.9	46.4	41.9
All other	4.3	6.9	5.5	6.0	5.6	4.7	7.1
Deductions as % of Total Gross Patient Rev							
Medicare	26.7	21.9	20.7	25.5	25.2	23.7	23.4
Medical Assistance	4.6	4.0	4.6	4.6	4.7	6.5	6.4
Commercial	4.5	6.1	7.3	5.6	6.8	11.7	9.7
Charity care	0.5	0.7	0.7	1.0	1.3	0.9	1.4
All other	0.4	0.9	0.5	0.6	0.7	1.4	1.8
Total deductions	36.7	33.7	33.8	37.3	38.7	44.2	42.7
Other Revenue and Net Gains or Losses							
Other revenue as % of total revenue	2.8	2.9	4.2	3.8	4.4	8.1	4.1
Net gains/losses as % of net income	4.7	0.4	3.5	11.2	-1.2	7.0	5.9
Expenses as % of Total Expenses							
Salary/fringe benefits	51.3	51.8	51.3	53.6	52.1	46.6	45.9
Supplies and services	38.7	34.0	35.9	33.6	34.6	41.6	43.2
Capital component	7.3	10.0	9.2	9.5	10.2	8.7	8.1
Bad debt	2.6	4.1	3.6	3.4	3.1	3.1	2.7
Fiscal Statistics							
Operating margin (%)	4.5	6.0	7.1	3.7	6.4	7.1	5.7
Total hospital profit margin (%)	4.7	6.0	7.4	4.1	6.3	7.6	6.0
Return on equity (%)	28.0	12.9	9.9	5.3	10.0	11.1	9.9
Current ratio	1.5	1.6	3.8	3.3	2.3	2.3	2.6
Days in net patient accounts receivable	60.9	66.9	62.9	59.9	60.2	66.1	51.8
Average payment period	66.6	68.0	51.0	47.3	62.1	53.9	49.0

Table 32. **GMS Hospital Averages for Selected Financial Statistics, by Volume Group, Wisconsin, FY 2002 (continued)**

	Volume Group						
	1	2	3	4	5	6	7
Equity financing (%)	26.3	49.6	55.6	59.7	51.1	60.2	55.9
Long-term debt to equity ratio	1.4	0.6	0.6	0.4	0.6	0.4	0.5
Times interest earned	5.7	4.0	5.0	2.9	4.4	5.8	5.2
Total asset turnover	1.5	1.1	0.7	0.8	0.8	0.9	0.9
Average age of plant (years)	11.4	9.2	9.1	8.7	8.0	9.8	10.0
Increase (decrease) total net patient rev (%)	23.8	24.9	16.8	8.2	21.0	17.6	16.4
Outpatient gross rev (% of total gross pt rev)	32.5	65.7	61.8	57.7	54.1	46.2	37.2
Patient Statistics							
Inpatient net revenue per discharge	\$11,337	\$5,176	\$4,999	\$5,387	\$5,923	\$7,391	\$10,164
Inpatient net revenue per day	\$2,010	\$1,535	\$1,631	\$1,472	\$1,554	\$1,690	\$2,035
Outpatient net revenue per visit	\$253	\$232	\$306	\$328	\$385	\$316	\$373

Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services.

Table 33. **GMS Hospital Averages for Selected Financial Statistics, by Analysis Area, Wisconsin, FY 2002**

	Analysis Area								
	1	2A	2B	3	4	5A	5B	6	7
Gross Rev as % of Total Gross Patient Rev									
Medicare	39.1	41.6	40.4	42.0	41.5	43.8	45.3	48.8	44.2
Medical Assistance	6.6	6.1	13.2	5.7	6.6	7.8	6.7	8.0	16.5
Commercial	48.4	47.8	39.1	48.4	46.8	42.3	37.4	38.8	31.7
All other	5.9	4.6	7.3	3.8	5.2	6.1	10.5	4.4	7.6
Deductions as % of Total Gross Patient Rev									
Medicare	20.4	24.9	26.0	19.7	22.7	23.2	24.0	24.1	21.5
Medical Assistance	4.2	3.8	9.1	3.5	4.0	4.9	4.5	4.5	5.0
Commercial	10.8	11.1	11.0	9.9	7.1	6.5	6.0	3.5	2.4
Charity care	1.3	0.8	1.3	0.8	1.6	0.8	0.6	1.5	1.2
All other	1.2	0.6	2.4	0.4	1.0	1.0	2.3	0.3	1.0
Total deductions	38.0	41.2	49.8	34.3	36.5	36.4	37.4	34.4	34.1
Other Revenue and Net Gains or Losses									
Other revenue as % of total revenue	9.2	3.1	5.1	3.0	3.7	3.2	4.8	4.0	2.3
Net gains/losses as % of net income	11.7	-1.7	9.9	17.3	4.7	5.8	5.0	-16.9	-11.6
Expenses as % of Total Expenses									
Salary/fringe benefits	50.0	47.7	41.7	51.6	54.2	52.1	48.5	49.2	55.6
Supplies and services	39.1	40.1	46.9	35.5	32.5	36.4	42.1	38.8	31.6
Capital component	8.2	9.2	8.1	10.5	10.6	8.1	5.6	9.6	8.3
Bad debt	2.7	3.0	3.3	2.4	2.7	3.4	3.8	2.4	4.5
Fiscal Statistics									
Operating margin (%)	5.4	11.3	4.9	5.0	1.4	9.2	9.5	6.4	4.0
Total hospital profit margin (%)	6.1	11.1	5.4	5.9	1.5	9.7	10.0	5.5	3.6
Return on equity (%)	11.5	15.3	9.2	8.5	2.2	12.2	15.2	8.0	9.1
Current ratio	2.3	2.4	2.3	2.9	2.6	3.0	5.5	1.9	1.6
Days in net patient accounts receivable	62.7	62.5	46.5	61.8	66.2	61.1	72.9	56.4	60.3
Average payment period	52.0	64.0	47.1	40.5	54.2	48.8	58.7	62.2	81.3

Table 33. **GMS Hospital Averages for Selected Financial Statistics, by Analysis Area, Wisconsin, FY 2002 (continued)**

	Analysis Area								
	1	2A	2B	3	4	5A	5B	6	7
Equity financing (%)	48.3	57.4	58.4	63.1	51.8	65.6	54.1	59.1	45.0
Long-term debt to equity ratio	0.8	0.4	0.4	0.4	0.5	0.3	0.1	0.5	0.7
Times interest earned	4.6	9.9	4.5	4.2	1.6	9.2	20.0	5.0	3.3
Total asset turnover	0.9	0.8	1.0	0.9	0.8	0.8	0.8	0.9	1.1
Average age of plant (years)	10.3	9.0	10.2	8.3	7.9	9.3	13.1	9.5	9.0
Increase (decrease) total net patient rev (%)	11.7	13.0	29.1	8.0	18.3	15.8	12.2	8.8	12.0
Outpatient gross rev (% of total gross pt rev)	43.8	49.8	37.1	55.1	50.8	53.4	43.9	40.4	57.5
Patient Statistics									
Inpatient net revenue per discharge	\$8,509	\$6,777	\$11,014	\$6,427	\$6,938	\$5,684	\$7,827	\$7,722	\$4,618
Inpatient net revenue per day	\$1,902	\$1,523	\$2,072	\$1,587	\$1,717	\$1,516	\$2,118	\$1,817	\$1,386
Outpatient net rev per visit	\$247	\$365	\$352	\$484	\$393	\$342	\$413	\$380	\$268

Source: *FY 2002 Hospital Fiscal Survey*, Bureau of Health Information, Division of Health Care Financing, Department of Health and Family Services